

FITCHBURG STATE COLLEGE

CATALOG YEAR OR DEGREE REQUIREMENTS CHANGE REQUEST FORM

Students should use this form if they wish to change their degree requirements and/or program name, as outlined in the catalog under which they entered the college as a degree seeking student, to a new set of requirements and/or program name, as outlined in a more recent catalog.

Students may only change from their catalog of entry to a more recent catalog that is already in print. By changing catalogs, a student is responsible for fulfilling **all** of the graduation requirements in the new catalog. Students may change catalogs one time only.

Student Name: _____ Student ID# (or SS #): _____

Current Program: _____ *Catalog Year of Entry: _____

(*To determine catalog year of entry, access your Web4 account and view your Degree Evaluation.)

New Program: _____ New Catalog Year: _____

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Please return this form to: **Office of the Registrar, Fitchburg State College, 160 Pearl Street, Fitchburg, MA 01420**

cc: Advisor

Phone: (978) 665-4196 • Fax: (978) 665-4151