

## CATALOG YEAR OR DEGREE REQUIREMENT CHANGE REQUEST

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 university as a degree seeking student, to a new set of requirements and/or program name, as outlined in a more recent catalog.

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:(*To determine catalog year of en	*Catalog Year of Entry:try, 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 University, 160 Pearl Street, Fitchburg, MA 01420 Phone: (978) 665-4196 • Fax: (978) 665-4151

cc: Advisor

REGform # 10

Print Services numberedforms.indd