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SAMPLE FORM BELOW

GS FORM 7
Rev 07/19



GRADUATE SCHOOL
1005 Campus Delivery
Fort Collins, CO 80523-1005

REQUEST FOR CHANGE OF DEPARTMENT AND/OR DEGREE PROGRAM

The GS7 is to be used when changing from one department to another or from one degree to another. Students may or may not complete the degree program from which they are changing. The GS7 should not be used when working on two degrees simultaneously (refer to "Procedures for working on two degrees" on the Instructions page). You will need to submit a new GS6 Program of Study for the new program you are changing to otherwise a hold will be placed on your registration. Once the GS7 has been approved, your department and you will be notified via your CSU e-mail address. Changing your class code PhD to Masters or Masters to PhD will create a new GPA for the current class at the end of the term.

GS7's WILL NOT BE PROCESSED FOR THE CURRENT TERM PAST CENSUS DATE.

STUDENT NAME: _____
Last First CSU I.D. Number

CSU E-MAIL ADDRESS: _____ Effective Term/Year _____
*current or future term only

Request to change:

FROM a program leading to the degree of: Master of: _____ PhD
In the department of: _____ Program Code _____

TO a program leading to the degree of: Master of: _____ PhD
In the department of: _____ Program Code _____ Site Code _____
(REQUIRED) (If applicable)

Select One:

- Change is necessary because I am not finishing the degree in which I am currently enrolled in.
- Change is necessary because I want to graduate with my current degree in my current department. I expect to graduate with the degree on _____ and start new degree on _____.
(Term Required) (Term Required)
- Change is necessary because I am graduating with my master's degree and then returning to Ph.D. I expect to graduate with my master's on _____.
(Term Required)
- Other (please explain) _____

Conditions of Admission that must be met during the first semester:

Other Conditions: _____

Signatures:

Student _____ Date _____

Department Head of Present Department _____ Date _____

Advisor of Present Department _____ Date _____

Department Head of New Department _____ Date _____

Advisor of New Department _____ Date _____

Graduate School Approval _____ Date _____

*Future admission accepted for current or next term only