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SAMPLE FORM BELOW



GRADUATE SCHOOL COLORADO STATE UNIVERSITY

1005 Campus Delivery, Fort Collins, Colorado 80523-1005 | Telephone: (970) 491-6817 | Fax: (970) 491-2194
Email: gradschool@colostate.edu | Website: <http://graduateschool.colostate.edu>

Request for Change of Department and/or Degree Program - GS Form 7

Students: Please pick your program code in the dropdown below. Please be patient as the page loads and contact the [Graduate School](#) if you are experiencing technical or data issues.

- Review the form information.
- Once you submit the form, your form will be sent to your department, your new department (if applicable), and then the Graduate School for review and approvals.
- 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. 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 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 add Changing your class code Doctoral to Masters or Masters to Doctoral will create a new GPA for the current class at the end of the term.
- GS7s WILL NOT BE PROCESSED FOR THE CURRENT TERM PAST CENSUS DATE.**

Current Program Details

Date	Student ID	Program Code
May 27, 2021	*88899900	CPSC-MS
First Name	Last Name	Email
Cam	Ram	cam@colostate.edu
Degree Sought	Department	
MS	Computer Science	

Request to Change Programs - New Program Details

Effective Term & Year (current or future term only)
* Fall Semester 2021

Select New Program
* MCS Computer Science: CPSC-DD-MCS

Select Advisor for New Program
* Last, First (Biology) |Last|First|email@colostate.edu

NOTE: Your advisor must meet committee requirements detailed in the [Graduate School Bulletin](#) and the [Graduate School website](#). A new GS6 Program of Study may be required when changing programs. Please check with your department or the [Graduate School](#) if you have questions.

Enter Site Code (if applicable)

Reason for Change
* Change is necessary because I am not finishing the program in which I am currently enrolled in.

Comments regarding reason for change
Changing to distance program.

Conditions of admission that must be met during the first semester (if applicable)
None.

*** For Students: Sign below using your initials. Complete the form by scrolling to the bottom and clicking on the 'Submit Form' button.**

Please contact the [Graduate School](#) with questions. Thank you.

...3338309931
CJ 05/27/2021, 9:57 PM
Initials Date

Program Coordinator Section

Please review the student's request and provide comments if necessary. **Sign using your initials and complete the form by scrolling to the bottom, click on the 'Submit Form' button.**

Current Program Coordinator

Program Coordinator First Name
First

Program Coordinator Last Name
Last

Program Coordinator Email
email@colostate.edu

Form reviewed by coordinator? If you select 'No', the form will not proceed and the student will need to submit a new form.
Yes

I am listed as **both the current and new program coordinator and would like to approve** as both the current and new program coordinator.

Program Coordinator Comments
NOTE: Comments will be visible to the student and all form participants.

...3432323439
CJ 05/27/2021, 10:14 PM
Initials Date

email@colostate.edu

New Program Coordinator

Program Coordinator First Name

Program Coordinator Last Name

Program Coordinator Email

Form reviewed by coordinator? If you select 'No', the form will not proceed and the student will need to submit a new form.

Program Coordinator Comments
NOTE: Comments will be visible to the student and all form participants.

Initials Date

Advisor Section

Please review the student's request and provide comments if necessary. **Sign using your initials and complete the form by scrolling to the bottom, click on the 'Submit Form' button.**

Current Advisor

Advisor First Name
First

Advisor Last Name
Last

Advisor Email
ckl229@colostate.edu

Advisor Decision (approved forms will proceed to department heads)
Approved

I am listed as **both the current and new advisor and would like to approve** as both the current and new advisor.

Advisor Comments
NOTE: Comments will be visible to the student and all form participants.

...3731303530
CJ 05/27/2021, 10:15 PM
Initials Date

email@colostate.edu

New Advisor

New Advisor Details

Advisor Decision (approved forms will proceed to department heads)

Advisor Comments
NOTE: Comments will be visible to the student and all form participants.

Initials Date

Initials Date

Department Head Section

Please review the student's request and provide comments if necessary. **Sign using your initials and complete the form by scrolling to the bottom, click on the 'Submit Form' button.**

Current Department Head

Department Head First Name

Department Head Last Name

Department Head Email

Department Head Decision (approved forms will proceed to the Graduate School)

I am listed as **both the current and new department head and would like to approve** as both the current and new department head.

Department Head Comments
NOTE: Comments will be visible to the student and all form participants.

CD 05/27/2021, 10:17 PM
Initials Date

New Department Head

Department Head First Name

Department Head Last Name

Department Head Email

Department Head Decision (approved forms will proceed to the Graduate School)

Department Head Comments
NOTE: Comments will be visible to the student and all form participants.

Initials Date

Graduate School Section

Approved by the Graduate School

Will a new GS6 be required?

Graduate School Comments
NOTE: Comments will be visible to the student and all form participants.

NY 05/27/2021, 10:17 PM
Initials Date