



EASTERN CONNECTICUT STATE UNIVERSITY
REGISTRAR'S OFFICE • ALVIN B. WOOD SUPPORT SERVICES CENTER
83 Windham Street • Willimantic, CT 06226 • Office: (860) 465-5224 Fax: (860) 465-4382

CHANGE INFORMATION ON SUBMITTED DEGREE APPLICATION

(Submit to Registrar's Office once completed)

Name: _____ Eastern ID #: _____

Telephone Number: _____

Graduation Date Initially Applied for (Ex. May 20XX): _____

Please Note: It is assumed that you have discussed any significant changes to your plan with your Faculty Advisor or ASC - Advising. Please be sure that if you are making any additions to your plan (Major/Minor/Concentration), that you have a plan to complete any outstanding requirements by your anticipated graduation date.

Requested Change(s) to be made – Select as Appropriate

Change Diploma Name to:

First: _____ Middle: _____ Last: _____ Suffix: _____

Change Anticipated Graduation Date to: August: _____ December: _____ May: _____
(Year) (Year) (Year)

List Changes to Plan of Study (Please specify the change to be made: Ex. Add/Drop/Change to Major/Concentration/Minor and then list the appropriate program):

Student's Signature

*Only required if NOT submitted via Eastern Email

Date