

For Office Use Only:



**AUGSBURG COLLEGE**  
Office of the Registrar CB71  
2211 Riverside Ave  
Minneapolis MN 55454

## Education Department Change of Program

(Please print)

Name: \_\_\_\_\_ Student ID # : \_\_\_\_\_

Address: \_\_\_\_\_ Phone (Home): \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone (Work : \_\_\_\_\_

Email Address: \_\_\_\_\_

(Check appropriate areas)

Effective term (s): Year:

UNDERGRAD to GRAD \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ 20 \_\_\_\_\_

GRAD to UNDERGRAD \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
MAE Director Signature/ Date

\_\_\_\_\_  
Student Signature/ Date

Program costs may differ. Please contact Financial Aid and Business Offices for further information.

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### FOR OFFICE USE ONLY

Date Received \_\_\_\_\_ **ACTION:** Approved Denied

Academic Status \_\_\_\_\_

Business Office \_\_\_\_\_ **DATA ENTRY:** \_\_\_\_\_ **NOTIFIED:** \_\_\_\_\_