



Application for Change of Graduate Objective

You may request a change of graduate objective at any point in your graduate career.

You should file an Application for Change of Graduate Objective if you are in one if these academic categories:

- You are a continuing CSUEB post-baccalaureate student who wishes to change your degree or credential program
- You are changing from an unclassified status to a graduate degree or credential program
- You are a CSUEB master's degree recipient who wishes to continue into a new MA/Credential program the following term
- You are a dual master's degree applicant

In order for your Application for Change of Graduate Objective to be considered, you must follow these steps:

1. You **must** check with your major department for the department application deadline and supportive documents for admissions consideration prior to submitting the application.
2. Submit the application in person to the Student Information Lobby in Warren Hall, or fax to (510) 885-4076.

The Application for Change of Graduate Objective will only be accepted during the following dates:

- Summer Quarter: Feb. 1 - Mar. 31.
- Fall Quarter: Oct. 1 – June 15
- Winter Quarter: June 1 - Aug. 31
- Spring Quarter: Aug. 1 - Dec. 31

After this form is submitted to Graduate Admissions by the student, the academic department will be notified so an admission decision can be made. Academic Departments must submit a decision on any Application for Change of Graduate Objective by the following dates in order for the change to become effective in time for the designated quarter (no later than the third week in the term prior to the entry of the program): • Summer Quarter: Apr. 15 • Fall Quarter: July 1 • Winter Quarter: Oct. 15 • Spring Quarter: Jan. 15

1. Desired effective term (check one term only): Summer ____ Fall ____ Winter ____ Spring ____

2. Legal name: _____ NetID: _____
LAST (FAMILY) FIRST MIDDLE

3. Mailing address: _____
STREET ADDRESS CITY STATE COUNTRY ZIP

4. Male Female 5. Date of Birth _____ 6. Country of Citizenship: _____

7. Home phone (____) _____ Alternate phone (____) _____ Horizon email address _____

8. Immediate objective at time of planned enrollment: (check one).

Master's degree only Credential only Master's degree and credential

Second bachelor's degree, intended major _____

Second master's degree, intended major _____

First time Dual master's degree, intended major 1) _____ intended major 2) _____

Other/ please specify _____

(a) Master's degree major: _____ Option, emphasis, or concentration within major _____

(b) Certificate objective, if any _____ (c) Credential objective, if any _____

(c1) Have you been admitted to a program for the credential you are now seeking? Yes No

If yes, which campus? _____

(c2) Do you hold or have you ever held a valid California teaching credential? Yes No

If yes, please indicate the status of your credential(s) on the line next to the credential title(s)

1 = Partial or Preliminary, 2 = Clear or Professional, 3 = Life, 4 = Expired

	General Elementary		Multiple Subject
	Standard Elementary		Single Subject
	General Secondary		Standard Secondary
	Administrative Services		Other:

9. If you have indicated a dual objective above, please indicate your first priority: Degree Credential/Certificate

10. Have you applied to this program before? Yes No

If yes: term _____ year _____ Did you enroll? Yes No (form continues)

Name _____ Net ID _____

11. List in chronological order all colleges and universities attended, including professional schools, regardless of length of attendance, even if no work was completed. (Attach a separate sheet if necessary.)

Name and Location of Institution	Mo/Yr of Attendance		Major	Est. Overall GPA	Degree Earned: Mo/Yr (to be) Received
	From	To			

12. List below the college courses in which you are currently enrolled and the additional courses you plan to complete before entering, including summer school courses. (Attach separate sheet if necessary.)

Courses in Progress				Courses Planned			
Institution	Term/Year	Dept. Course Number and Title	Unit Value	Institution	Term/Year	Dept. Course Number and Title	Unit Value

13. Academic honors (scholarships, awards, publications): _____

14. List all foreign languages that you know, with level of proficiency, (i.e., fluent, average, passable): _____

15. List below standardized U.S. graduate Admissions tests taken: (GMAT, GRE, MAT, TOEFL, NTE, CBEST, etc.)

Standardized Admission Test	Latest Date Taken (or to be taken)	Score

16. Employment: List all applicable employment. Include military service but omit summer and part-time work not relevant to your professional (academic) goal. Indicate present employer, if now employed.

Employer	Nature of Work	Inclusive Dates

17. List below three faculty members who know your academic qualifications, including performance, potential and motivation. If required by the individual program to which you applying, request that these individuals send letters of reference on your behalf to the place and person indicated by the major.

Name	Address	Position

18. Write a brief statement of your reason(s) for pursuing post-baccalaureate study. (Attach separate sheet if necessary.) Include any additional information concerning preparation which is pertinent to your specified objective.

I hereby certify that the information submitted in this application is true, complete and accurate. I understand that any misrepresentation will be cause for denial of admissions.

Signature _____ Date _____