GRADUATE STUDENT / POST-BACCALAUREATE STATUS CHANGE

Last Name	First and Middle Names		CIN#
CalStateLA.edu ema	ail address		Phone Number
College—Program O	bjective—Department/Division/Program/	School (e.g., NSS— M.	S.—BIOL or HHS—Cert—AGER)
Effective Date:	☐ Fall	Summer	Year:
UNCLASSIFIED	Post-baccalaureate		(G4)
CLASSIFIED	Master's—Conditional	(G1)	
	Master's—Classified C	Fraduate	(G2)
	Master's—Advanced to	o Candidacy	(G3)
	Credential/Certificate-	-Conditionally Classifie	ed (C)
	Credential/Certificate-	(G5)	
	Doctorate—Conditiona	(G6)	
	Doctorate—Classified	(G7)	
	Doctorate—Advanced to Candidacy		(G8)
		5	
OBJECTIVE	 UNG (No Degree Objective) Credential Certificate 	ACTION	Add additional program to current program (Graduate Studies dean signature required)
	M.A. M.S.		Delete current program and add new program (Graduate Studies dean signature required)
	Other Master's:		Change UNC to G series
	Ph.D.		Change option only
	Ed.D.		Change classification only (changes G1–G7)

NOTE: College associate dean's signature is required for all actions. Graduate Studies dean's signature is required (in addition to the college associate dean's) only to add and delete programs.

College Associate Dean signature (REQUIRED FOR ALL)

Dean of Graduate Studies signature	(ONLY TO ADD/DELETE PROGRAMS)	
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Date

Date