

## Student Change/Add Major/Add PGC

This form is required for students who find it necessary to change their major, who wish to add a second major, or add a Post-Graduate Certificate to their program plan. Prior to requesting the change, students should be in good academic standing. Forms submitted without the required signatures will not be processed. Please note that the timing of a request may affect your ability to enroll in required courses.

\*Students who wish to add a Post-Graduate Certificate can only do so with the understanding that they must begin courses immediately following the completion of their MSN/DNP Degree.\*

Students are required to meet with their current Academic Advisor to discuss reasons for the change as well as potential academic implications. The Academic Advisor must sign the form acknowledging that he/she is aware of the request. It is also the student's responsibility to consult with the Office of Financial Aid to understand any possible financial implications. The student should sign and submit the completed form with ALL required documentation needed for faculty review to:

MSN Program Office DUMC 3322 Durham, NC 27710 Fax: 919-660-9243

Email: SON-MSN@dm.duke.edu

The MSN Program Office will coordinate an interview (if needed) with the student and faculty lead of the major/specialty area. Once a final decision is made on the change request, the Office of Student Services will notify the student.



## Student Change/Add Major/Add PGC

Section 1: Student & Program Information	
Student Name:	Duke Unique ID: Date:
Program: MSN Certificate Major	or: Specialty:
Section 2: Proposed New Major/PGC	
Is student seeking a change of major: Yes	No
Is student seeking a double major: Yes	No
Is student seeking a Post-Graduate Certificate	e: Yes No
Proposed New Added	Major/Certificate:
Proposed New Graduation Date:	
Current Advisor:	Signature: Date:
Section 3: Additional Supporting Document	ts Required by MSN Program
Submit personal statement expressing inte	erest on proposed change or added major/PGC
Submit updated Resume/CV	
Submit two new recommendations (profes	ssional and/or academic)
Meet with lead faculty of proposed new m	najor/PGC (MSN Program Office will schedule and confirm)
I confirm that all required documentation	listed above are complete and attached with this form.
Student Signature:	Date:
Section 4: Faculty Endorsements	
Approved: Yes No	
Lead Faculty:	Signature: Date:
Program Director:	Signature: Date:
Notify Clinical Placements Office	Notify New Advisor
(for office use only)	(for office use only)