New York University
A private university in the public service
Courant Institute of Mathematical Sciences
Department of Computer Science
251 Mercer Street
New York, NY 10012-1185
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Change of Program Application

This form is for students wishing to change degree programs within the Department of Computer Science.

When the form is completed, please submit it to your advisor, either Jennifer Conlan Darlington or Katie Laugel, along with an updated resume and a revised statement of purpose.

Note that decisions regarding this application will not be made before a student has completed one full semester in the department, or a minimum of three graduate computer science courses.

Name _____
(Last) (First) (Middle)

NYU ID #_____ Date of Birth _____

Other names which may appear on credentials _____

Address _____

Telephone numbers:
(work) _____ (home) _____ (cell)_____

NYU email address: _____

From _____
(Department/Program)

To _____
(Department/Program)

Semester you wish to begin: ☐ Fall ☐ Spring ☐ Summer Year _____

Degree: ☐ Non Degree ☐ Master's of Science

Term of first registration in GSAS: Semester _____ Year _____

Last term attended in GSAS: Semester _____ Year _____

To Be Filled Out By The Computer Science Department

Decision: _____ approved _____ rejected

Notes: _____

_____

_____

Signature _____ Date _____