CHANGE OF LEVEL REQUEST FORM

Current immigration status (circle one):  F-1  J-1

Change in Level of Study from _____________ to _____________  (example: BA to MA, or MS to PhD)

Changing departments?  Yes  No  If “yes,” name of new department:

___________________________________________________________________________

Current expiration date on I-20 or DS-2019: ________ / _______ / ________

Month         Day     Year

Do you have any F-2 or J-2 dependents? (circle one):  Yes  No

To be completed by Academic Adviser or Graduate Program Coordinator (before submitting to ISS):

The above named student is making normal progress toward his/her educational objective.

New degree level: ______________________       Effective: ___________ quarter, 20___

Student is expected to complete his/her new educational objective:_________ quarter, 20___

Adviser name:______________________________________  Phone:_________________

Signature:____________________________________________ Date:________________

Allow 7-10 business days for ISS processing.  Complete reverse.
STATEMENT OF FINANCIAL ABILITY

Indicate the funding sources used to support you and your dependents (check all that apply):

☐ Personal / Family Funds. Please attach documentation of financial ability (such as bank statements less than 6 months old) which covers the expenses for you during your studies.

☐ Department Funding (RA or TA appointment). Attach a letter from the funding department which includes salary and tuition waiver amounts, as well as the length of the appointment.
  NOTE: Graduate student funding may not cover all student expenses and will not cover the expenses of your dependent(s). Please indicate an additional source of funding beyond your RA/TA appointment that will cover any remaining expenses.

☐ Government Funding. Attach a letter which details the source, amount and duration of the funding.

I certify that I will be responsible for the total cost for each year of study at the University of Washington, including expenses associated with my dependents.

____________________________________________   __________________
Student signature                                      Date

ESTIMATED EXPENSES FOR THE 2016-2017 ACADEMIC YEAR

Undergraduate:  9 months: $54,792  12 months: $73,056
Graduate, self-supported:  9 months: $51,213  12 months: $68,284
Graduate, University supported:  9 months: $36,267  12 months: $48,356
Dependent spouse:  9 months: $8,680  12 months: $11,573
Dependent child:  9 months: $6,040  12 months: $8,054

Allow 7-10 business days for ISS processing.