

**TEACHERS COLLEGE**  
**COLUMBIA UNIVERSITY**  
**Office of Doctoral Studies**

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**Change of Program Plan**

Change of Program Plan for:

Ed.D.

Ed.D. CTAS

Ph.D.

Student Name: \_\_\_\_\_ TC ID #: \_\_\_\_\_

**NOTE: If you need to make more than four (4) changes in total to your Program Plan, you must complete a new Program Plan.**

I request the following change(s) to be made on my Program Plan.

	Program Code & Course Number	Term/Year	Credit(s)	Brief Course Title	Add/Drop	Section of Program Plan (Place course credits in appropriate column)			
						(M)	(R)	(B)	(E)
1.									
2.									
3.									
4.									

(Note: M = Major Courses, R = Research Courses, B = Broad & Basic Courses, E = Elective Courses)

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Advisor's Name: \_\_\_\_\_

<b>Office Use Only</b>
Action of the Office of Doctoral Studies:
Date: