

Print Name _____ 7 Digit SOLAR ID _____ Date _____

Signature _____ UW-Parkside Email _____ @rangers.uwp.edu

Address _____ Phone _____

NOTE: Submit this completed form to the Sport Management Director for approval.

PROGRAMS

Change from Traditional to Fully Online (MSSO)

Change from Fully Online to Traditional

DEPARTMENT/PROGRAM APPROVAL

Accepted

Denied

Assigned Advisor: _____

Advisor SOLAR ID: _____

Authorized Department Signature: _____

Print Authorizer's Name: _____

Date Signed: _____

Department: Submit this form to the Office of the Registrar for processing.

OFFICE OF THE REGISTRAR

DATE: _____ INITIALS: _____