REQUEST FOR CHANGE IN A GRADUATE STUDENT'S STATUS

To: The Committee on Graduate Admissions and Study Student Number 0559786

FROM: Department of CHEMISTRY + CHEMICAL BIOLOGY

RE: (Student's Name) Samanbir KALIRAI current program: Master's ☒ Ph.D. ☐ degree

It is recommended that the following change(s) be made in the status of the above named student:

1. Proceed with Ph.D. studies without obtaining a Master's degree ☐
2. Proceed with Ph.D. studies but also concurrently work towards a Master's degree ☐
3. Admit to Ph.D. studies ☐
4. Not proceed with Ph.D. studies but apply for the Master's degree (student's signature ***NOT*** required) ☐
**5. Withdraw (Requested by student) ** ☐
6. Required to withdraw by the Department (student's signature ***NOT* required) ** ☐
**7. Full Time to Part-time ** ☐
8. Part-time to Full Time ☒ OTHER

**Require stop payment information at bottom of form (if full-time).

EFFECTIVE DATE: 28 SEP 2012 SUPERVISOR'S SIGNATURE: Alan L. Hitchcock Date: 28 Sep 2012

COMMENTS (Please give reason for change): SUCCESSFUL COMPLETION OF MSc, STARTING PhD in Utrecht University on 1-Oct 2012

STUDENT'S SIGNATURE: Date:

For items 4 and 6 above the approvals of the Department Chair/Graduate Advisor, as well as Ph.D. Supervisory Committee are required; otherwise only the Department Chair/Graduate Advisor signature is required.

THIS REQUEST FOR CHANGE IS RECOMMENDED BY:

Dept. Chair/Grad. Advisor/ Prog. Co-ord: _____

Date: _____

Ph.D. SUPERVISORY COMMITTEE

Committee Chair 1. _____

Members 2. _____

3. _____

APPROVED FOR THE COMMITTEE ON GRADUATE ADMISSIONS AND STUDY

_____ Associate Dean

_____ Date

GRADUATE STUDENT STOP PAYMENT/TERMINATION NOTICE

Stop All Student's Pay Effective: Month OCT Day 1 Year 2012

Number of T.A. hours completed: Term 1 _____ Term 2 _____ Term 3 _____

_____ (PRINT NAME) Department Chair/Grad. Advisor/ Prog. Co-ord.

_____ Signature

_____ Date

SGS Revised April/04