CHANGE OF CAMPUS REQUEST

Use this form to change your campus location. Note: if you request a change to an extended campus location but register for a course that is listed in Blacksburg, you will be considered a Blacksburg student for tuition purposes. International students must consult with an international student advisor about the impact of the campus change on their immigration status; a Request for SEVIS Transfer must be completed after the campus change is approved.

Blacksburg Hampton Roads National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBMITTEE CHAIRPERSON Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Citizenship U.S. Citizen #If non-U.S. citizen, please list your visa status: With row of account, preferred			
Clitzenship U.S. Citizen *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: **If non U.S. citizen, please list your visa status: **Current Program: Pegree Level	Citizenship U.S. Citizen #If non-U.S. citizen, please list your visa status:			
Clitzenship U.S. Citizen *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: **If non U.S. citizen, please list your visa status: **Current Program: Pegree Level	Citizenship U.S. Citizen #If non-U.S. citizen, please list your visa status:			
Clitzenship U.S. Citizen *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: *If non U.S. citizen, please list your visa status: **If non U.S. citizen, please list your visa status: **Current Program: Pegree Level	Citizenship U.S. Citizen #If non-U.S. citizen, please list your visa status:			
U.S. Citizen Permanent Resident Non-U.S. Citizen* *If non-U.S. citizen, please list your visa status: Current Program:	U.S. Citizen Permanent Resident Non-U.S. Citizen* "If non-U.S. citizen, please list your visa status: "If non-U.S. citizen, please list your visa status: "If non-U.S. citizen, please list your visa status: "Urrent Program: Obegree Level	Last/Family Name	First/Given Name	Middle Name
U.S. Citizen Permanent Resident Non-U.S. Citizen* *If non-U.S. citizen, please list your visa status: Current Program:	U.S. Citizen Permanent Resident Non-U.S. Citizen* "If non-U.S. citizen, please list your visa status: "If non-U.S. citizen, please list your visa status: "If non-U.S. citizen, please list your visa status: "Urrent Program: Obegree Level		Citizenship	
E-mail Address: Current Program:	TUDENT Signature Committee CHAIRPERSON Signature Committee CMM/DD/YY) Committee CMM/DD/YY CMM/DD/YY) Committee CMM/DD/YY CMM/DD/YY) CMM/DD/YY) CMM/DD/YY CMM/DD/YY CMM/DD/YY CMM/DD/YY CMM/DD/YY CMM			: Resident Non-U.S. Citizen*
Current Campus Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	### Committee Chairperson Signature ### Date (MM//DD/YY) ### Degree Level Doctoral	Last 4 digits of VT ID	*If non-U.S. citizen, please list you	r visa status:
Current Campus Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	### Committee Chairperson Signature ### Date (MM//DD/YY) ### Post of Advisor Signature ### Date (MM//DD/YY) #### Post of Advisor Signature #### Date (MM//DD/YY) ##### Post of Advisor Signature ####################################			
Current Campus Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	### Committee Chairperson Signature ### Date (MM//DD/YY) ### Post of Advisor Signature ### Date (MM//DD/YY) #### Post of Advisor Signature #### Date (MM//DD/YY) ##### Post of Advisor Signature ####################################			
Current Campus Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Doctoral Education Specialist Masser's Graduate Certificate Non- Degree Level Blacksburg Hampton Roads National Capital Region Richmond Capital Region Roanoke Southwest Virginia Virtual Term Change my campus to: Blacksburg Hampton Roads National Capital Region 'Richmond Commonwealth Campus Commonwealth Campus Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	### Committee Chairperson Signature ### Date (MM//DD/YY) ### Degree Level Doctoral	F mail Address.	Current Bro	ogram.
Current Campus Blacksburg "Hampton Roads "National Capital Region Richmond Virtual Doctoral Education Specialist Master's I wish to change my campus to: Blacksburg "Hampton Roads National Capital Region Richmond Virtual Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg "Hampton Roads "National Capital Region Richmond Roanoke Southwest Virginia Virtual Education Specialist Master's Graduate Certificate Non-Degree Commonwealth Campus Wish to change my campus to: Blacksburg Hampton Roads National Capital Region "Richmond Commonwealth Campus Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VI ICAB1, 3625 Potomac Ave, Alexandria		Current Pro	ogram.
Blacksburg Hampton Roads National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBMITTEE CHAIRPERSON Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg "Hampton Roads "National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg https://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	@vt.eau account, preterred		
Blacksburg Hampton Roads National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBMITTEE CHAIRPERSON Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg "Hampton Roads "National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg https://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Blacksburg Hampton Roads National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Doctoral Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Stubents Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBMITTEE CHAIRPERSON Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg "Hampton Roads "National Capital Region Richmond Doctoral Education Specialist Master's Graduate Certificate wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg https://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Roanoke Southwest Virginia Virtual Education Specialist Master's Graduate Certificate Non- Degree I wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Roanoke Southwest Virginia Virtual Education Specialist Master's Graduate Certificate Non- Degree Blacksburg Hampton Roads National Capital Region Richmond Commonwealth Campus Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Current Campus		Degree Level
I wish to change my campus to: Blacksburg Hampton Roads Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year COMMITTEE CHAIRPERSON Signature Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.wt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Education Specialist Master's Graduate Certificate Non- Degree Commonwealth Campus Term Change Effective Fall Spring Summer Year Date (MM/DD/YY) Date (MM/DD/YY) TUDENT Signature Date (MM/DD/YY) TUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria		mond	Doctoral
I wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Wish to change my campus to: Blacksburg Hampton Roads Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) TUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg RADUATE SCHOOL Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Roanoke Southwest Virginia Virtual		
Non-Degree Commonwealth Campus Richmond Commonwealth Campus Commonwealth Campu	Wish to change my campus to: Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) PEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg RADUATE SCHOOL Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			Master's
Blacksburg Hampton Roads Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) INTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg Hampton Roads Roanoke Southwest Virginia Virtual Virtual Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) EPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) NTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg IRADUATE SCHOOL Signature Date (MM/DD/YY) Date (MM/DD/YY) TICAB1, 3625 Potomac Ave, Alexandria			Graduate Certificate
Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) INTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	ROANOKE SOUTHWEST Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) SEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) NTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	I wish to change my campus to:		Non- Degree
Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VI ICAB1, 3625 Potomac Ave, Alexandria	Roanoke Southwest Virginia Virtual Term Change Effective Fall Spring Summer Year TUDENT Signature Date (MM/DD/YY) TODENT Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) SUBMITTEE CHAIRPERSON Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Blacksburg Hampton Roads National Capital Region Rich	nmond	Commonwealth Campus
Term Change Effective Fall Spring Summer Year STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBMIT STUDENT Signature Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	TUDENT Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			·
STUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature Date (MM/DD/YY) DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	TUDENT Signature Date (MM/DD/YY) COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Date (MM/DD/YY) SEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY) SUBmit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	Ç		Term Change Effective
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Department Contact (Graduate Staff Coordinator) Signature Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature e-mail (@vt.edu, preferred) Date (MM/DD/YY) Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	STUDENT Signature		Date (MM/DD/YY)
Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Date (MM/DD/YY) Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria	COMMITTEE CHAIRPERSON Signature	e-mail (<i>@vt.ed</i>	/u, preferred) Date (MM/DD/YY)
Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WT ICAB1, 3625 Potomac Ave, Alexandria	Submit your completed form: http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WEADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature	Date (MM/DD/YY)	
http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WEADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria			
http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg WEADUATE SCHOOL Signature Date (MM/DD/YY) Nttp://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg VT ICAB1, 3625 Potomac Ave, Alexandria			
http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	http://gs.vt.edu/forms 120 Graduate Life Center, Blacksburg Bate (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	INTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature	Date (MM/DD/YY)	
GRADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria	RADUATE SCHOOL Signature Date (MM/DD/YY) VT ICAB1, 3625 Potomac Ave, Alexandria			http://gs.vt.edu/forms
==== (,===,,	==== (,==,,			120 Graduate Life Center, Blacksburg
		GRADUATE SCHOOL Signature	Date (MM/DD/YY)	VT ICAB1, 3625 Potomac Ave, Alexandria
FUI assistance, tall 540-231-8030 01	1 01 assistance, tall 340-231-6030 01	-	, , ,	For assistance, call 540-231-8636 or
	email grads@vt.edu			