

This form is used to **change** an All But Dissertation status between *In Residence* and *In Absentia*. In most cases, All but Dissertation *In Absentia* status is not permissible for international students. International students are required to consult their home department and the Office of International Education to see if they qualify for All But Dissertation *In Absentia* status. Reference the university policy on doctoral student status: www.cmu.edu/policies/student-and-student-life/doctoral-student-status.html. **This form should be submitted by the semester Add deadline.**

Important final semester information: Students who are *In Residence* status and defending their thesis must remain *In Residence* and may not change to *In Absentia* status during their final semester. This form is not required.

All But Dissertation Status Change

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last/Family First and/or Preferred MI

Home College: _____ Department: _____

Campus Location: Pittsburgh Portugal Silicon Valley Thailand
(please select one)

Effective Semester: _____ Year: _____

Are you defending your thesis for the effective semester?

No, I am not defending my thesis; please change my status to: In Residence In Absentia

Yes, I am defending my thesis. My current status is *In Absentia*; please change my status to: In Residence In Absentia (limited time, on-campus defense) In Absentia (offsite defense)

Student Signature: _____ Date: _____
mm/dd/yyyy

DEPARTMENT AUTHORIZATION

First Semester Admitted Into Doctoral Program:

Doctoral Student Status Will Lapse:* _____
Semester Year

_____ Semester Year

As the primary thesis advisor, I have reviewed this All But Dissertation Status change request. This status change request is:

Approved Denied for the following reason: _____

Primary Thesis Advisor Authorization: _____ Date: _____
Print/Type Name Signature mm/dd/yyyy

Department Head Authorization: _____ Date: _____
Print/Type Name Signature mm/dd/yyyy

UNIVERSITY REGISTRAR'S OFFICE USE ONLY

Semester: _____ Program changed from: _____ To: _____ Initials: _____ Date: _____

ENTITY CHANGE (if applicable)

Semester: _____ Previous Entity: _____ New Entity: _____ Initials: _____ Date: _____

Semester: _____ Previous Entity: _____ New Entity: _____ Initials: _____ Date: _____

STUDENTS ACCOUNT OFFICE USE ONLY (if applicable)

Director of Student Accounts Signature: _____ Date: _____