

# Carnegie Mellon University

## Office of International Education

5000 Forbes Ave, Cyert Hall 1<sup>st</sup> Floor, Suite 101 Pittsburgh, PA 15213  
Phone: (412) 268-5231 • Email: [oine@andrew.cmu.edu](mailto:oine@andrew.cmu.edu) • Web: [www.cmu.edu/oine](http://www.cmu.edu/oine)

## Change of Program Request Form for F-1 and J-1 Students

Students who will change their program must submit this form and other required documents to the Office of International Education (OIE) at least 30 days before:

1. Their current I-20/DS-2019 expires, **OR**
2. The date their change of program goes into effect, **whichever comes first.**
  - New I-20's/DS-2019's take 5 to 10 business days to process from submission of all required materials

### This Form Is For:

- A. Students who will change educational level at CMU (i.e. Bachelor's to Master's or Master's to PhD)
- B. Students who will enter the Master's portion of an integrated Master's program or 5<sup>th</sup> Year Master's Program
- C. Graduate students who will start a new program at the same educational level (i.e., a student who has completed one graduate program and will start a new one, or who is transferring from one graduate program to another)

**NOTE:** If you are currently on OPT/STEM OPT from CMU, your work authorization will automatically end on the start date of the new program listed on your new I-20.

### Application Process:

**STEP 1: Be Informed.** Read this handout thoroughly and carefully.

**STEP 2: Receive your new academic department's recommendation.** Have your academic advisor (from your new program) complete page 2 of this form.

**STEP 3: Obtain Proof of Financial Support.** Submit proof of financial support to cover the remainder of the time you will need to complete your new program. **NOTE:** If your change of program results in an earlier program end date than your current I-20 end date, you do not need to submit financial documents.

- You must include financial support for tuition, living expenses, and for any dependents (see current expenses below).
- For department funding, you may use admissions letter and page 2 of this form, which describes the amount and duration of the support.
- If you are funded by source other than yourself, you must submit OIE's Affidavit of Support Form (see [undergraduate form](#) or [graduate form](#)) signed by your sponsor with original supporting financial documents, such as original bank letters showing that the funds are available. **Financial documents must have been issued and dated within the past 6 months.**

Estimated Expenses 2025-2026			
Undergraduate Expense Type	Undergraduate Student Expenses	Graduate Expense Type	Graduate Student Expenses
Tuition and Fees	\$68,776	Tuition	<a href="#">Contact Academic Dept.</a>
Living Expense - Housing	\$11,250	Fees	\$976
Living Expense - Food	\$7,644	Living Expenses	\$30,210
Health Insurance	\$2,967	Health Insurance	\$2,967
Books and Supplies	\$2,400	Books and Supplies	\$2,212
<b>Total</b>	<b>\$93,037</b>	<b>Total</b>	<b>\$36,365 + Tuition</b>
Dependent Expenses (if Applicable)	Additional Undergraduate Expense	Dependent Expenses (if Applicable)	Additional Graduate Expense
Spouse	\$10,922	Spouse	\$10,992
One Child	\$8,304	One Child	\$8,304
Each Additional Child	\$5,388	Each Additional Child	\$5,388

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### Change of Program Request Form for F-1 and J-1 Students

**Student Information: Completed by the student.** Complete the information in this section and then give this form to the appropriate person in your academic department. If you are not funded by your department/CMU, then you must submit evidence of financial support which may include **OIE's Affidavit of Support Form** from (see [undergraduate form](#) or [graduate form](#)) from your financial sponsor with supporting financial documentation, such as bank letters or bank statements showing that the funds are available for your education.

**All supporting financial documentation must have been issued within the past 6 months.**

**STUDENT CHANGING FROM:**

Academic Department:

Degree Program:

Surname/Family Name:

Date of Birth (mm/dd/yyyy):

Current Passport Expiry  
Date (mm/dd/yyyy):

Current US Address:

**STUDENT CHANGING TO:**

Academic Department:

Degree Program:

Given/First Name:

AndrewID:

U.S. Phone Number:

(Street)

(Apt #)

(City)

(State & Zip Code)

**\*Address must also be updated in SIO!**

**Academic Advisor(s) or Authorized Department Personnel(s) From Student's New Degree Program.**

Academic Department:

New Academic Program:

Level of Study: *Bachelor* *Master* *PhD* *Other* \_\_\_\_\_

New Program Will *START*  
Fall Spring Summer AY: \_\_\_\_\_

New Program Will *END*  
Fall Spring Summer AY: \_\_\_\_\_

Cost of Tuition (per semester):  
\$

Check Here If ABD Tuition:

**IF FUNDED BY THE ACADEMIC DEPARTMENT:** Complete the information below to indicate the amount of financial support being provided by the department for the student named above.

Departmental Support Begins  
(mm/dd/yyyy):

Amount of Tuition Support Being Provided:  
\$

Amount of Monthly Stipend:  
\$

Stipend Is For:  
9 Months 12 Months Other \_\_\_\_\_

**VERIFICATION TO BE COMPLETED AND SIGNED BY THE ACADEMIC ADVISOR OR DEPARTMENT COORDINATOR.**

**NOTE: Providing materially false, fictitious, or fraudulent information may subject you to criminal prosecution under 18 U.S.C.1001. Other possible criminal and civil violations may also be applicable.**

Name of Academic Advisor/Authorized Department Personnel (Print):

Email and Telephone:

Signature of Academic Advisor/Authorized Department Personnel:

Date: