

## Academic Record Update

This form is for academic departments to make changes to student records, to create new semester records for students who previously attended, and/or to create new student records in special cases:

- Undergraduate level → graduate level
- Degree program → certificate program
- Former student in X program/degree → current student in Y program/degree

Before making this request, please take note of the following:

- This form cannot be used for academic actions, leaves of absence, returns from leave of absence, university withdrawals, or All But Dissertation status.
- Students with holds on their account cannot be made eligible to enroll (R3 status) until the hold has been released.

### STUDENT INFORMATION

Andrew ID: \_\_\_\_\_ Name: \_\_\_\_\_  
Last/Family Name Preferred/First Name Middle Name/Initial

**Required to create new student records and update records of students who previously attended:**

Personal Email: \_\_\_\_\_ Permanent Address: \_\_\_\_\_  
 Mobile Phone: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_ Visa Status: \_\_\_\_\_  
mm/dd/yyyy (for non-U.S. citizens) (for non-U.S. citizens; e.g., F1)

### ACADEMIC RECORD INFORMATION

All fields below must be completed when creating a new record, adding or changing a declared degree, or merging record information (e.g., connecting graduate admission records from a separate database). Updates to pre-existing, active S3 records do not require all sections to be filled in; you may enter information only where changes are being requested.

Effective Semester: \_\_\_\_\_ Should this be applied to future semester records? Yes No  
(required) (required)  
 Dfc[ fUa 7cXY. \_\_\_\_\_ Does this require an entity change? Yes No  
E.g., Transition from Qatar currency to US currency

9bfc`a YbhGhUhg  
 7`Ugg@Y] Y.  
 8Y[ fYY. \_\_\_\_\_ Is this part of a dual or integrated degree program? Yes No

7c`Y[ Y.  
 8YdUfha Ybh  
 AU'cf.  
 9 dYVWX; fUXi Ujcb.  
 HYfa ]bU`8Y[ fYY. Yes No

Primary Advisor: \_\_\_\_\_  
 AU "I b]rg

### DEPARTMENT AUTHORIZATION

Contact Name: \_\_\_\_\_ Andrew ID: \_\_\_\_\_ Date: \_\_\_\_\_  
mm/dd/yyyy

*Departments must submit this completed form to registrar-forms@andrew.cmu.edu. For full form submission instructions, please visit cmu.edu/es/forms.instructions.html.*

**UNIVERSITY REGISTRAR'S OFFICE ONLY**

<b>Entity Change:</b> <small>(if applicable):</small>	<b>CURRENT</b>	Entity: _____	Program Code: _____	Date: _____	URO staff: _____
	<b>NEW</b>	Entity: _____	Program Code: _____	Date: _____	