COLLEGE OF ENGINEERING
Student Semester Study Plan

I. Instructions (Use a different form for each semester.)
This Student Study Plan is to be used by students who:

1. Intend to apply for Change of Major into a College of Engineering undergraduate program.
2. Are on Probation status, either by University or in Major (limited to 12 units).
3. Are seeking Reinstatement to an undergraduate or graduate program after Disqualification.
4. Are seeking permission to enroll through Open University.
5. Have other reasons for documenting advisor recommendations on classes.

Note that fulfillment of the Study Plan does not guarantee change of major or reinstatement to the Major.

SJSU ID ____________________________
Last Name ____________________________ First________________ MI __________
Street /Apt# __________________________
City __________________________ State ______ Zip __________________________
Phone # __________________________ E-mail Address __________________________

II. Additional information
1. Students applying for Change of Major into a College of Engineering undergraduate program will need to attach this Study Plan, signed by an Adviser, to the University’s Change of Major Application (http://www.sjsu.edu/registrar/forms/) and submit as one packet to the Dept Office by Dec 20 or May 20 each year.
2. Students seeking Reinstatement to a Major, after Disqualification from University or from Major, will need to attach this Study Plan, signed by an Advisor, to the University’s Reinstatement Petition (http://www.sjsu.edu/registrar/forms/).

III. Current Status

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<th>Units Complete</th>
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In Good Standing
On Probation (in Major) ____ (in University) ____ (SJSU) ______
Disqualified (from Major) ____ (from University) ____ (All College) ______
Undergrad ___ Grad ___

Current Major/Concentration: __________________________

Requested Major/Concentration (if seeking Change of Major): __________________________

*Must complete study plan by 70 units

IV. Advisor Recommended Courses (major-related) that may be used to fulfill the Study Plan:

Semester:________________________ Date____________

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Preliminary Approval __________________________
Advisor ’s Printed Name/Signature/Date

V. Other Advisor Comments

VI. Final Approval

____________________________
Advisor ’s Printed Name/Signature/Date