

**Policy S-3.03
UNIVERSITY OF FLORIDA
COLLEGE OF NURSING**

TITLE: CHANGE IN TRACK FOR MSN STUDENTS

POLICY: Any student may request a change in track after admission. Students with the experiences and academic achievement to support the requested change may request such a change on a space available basis. Change in track requests may result in extended curriculum plans.

RATIONALE: Each track has enrollment limits based on available clinical placements and faculty supervision.

PROCEDURE:

A. Change in Track

1. The student requesting a track change, obtains the form, Request for Change in Track, (See Attachment #1) on College website.
2. The student completes the request form and forwards to the Assistant Dean for Student Affairs (ADSA). **Request forms must be received by the ADSA by October 15th of the Fall semester prior to the track change.**
3. The ADSA will forward the student's request to the student's current Department Chairperson. If the Department Chairperson approves a change in track, she/he will complete Section III on the request form and forward to the Department Chairperson of the requested track. The Department Chairperson will evaluate the student's request and discuss it with the appropriate track coordinator. The Department Chairperson will complete Section IV and forward the request form to the ADSA.
4. The ADSA will notify the student of the outcome and revise the student's curriculum plan as indicated.
5. A student denied a track change is able to continue study in the track for which the student is already admitted, may reapply for a different track, or request to be placed on a waitlist for the desired track.

Review or Approval Authority	Responsible Party	Initial Approval / Review	Most Recent Approval / Review Of Changes	Editorial Changes	Policy A-01 Review
Approval	Administrative Council	6/01	3/13		3/13
Review	Leadership Council	12/97	4/13		
Approval	Dean	1/98	4/13		

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Attachment # 1

Request for Change in MSN Degree Track

I. DEMOGRAPHICS

Student (Name): _____ UFID#: _____ Date: _____
Email: _____
Phone: _____
Present Track : _____ Proposed Track: _____
Semester Enrolled: _____
Part-time _____ Full-Time _____

II. REQUEST (Completed by student and submitted to Office of the Assistant Dean for Student Affairs by October 15)
Reason for Change:

Career Goals:

III. CHAIRPERSON REVIEW (CURRENT TRACK)
Recommendation of Department Chairperson, Current Track:

Approval of Dept Chairperson: YES ___ NO ___

Signature Date

IV. CHAIRPERSON REVIEW (REQUESTED TRACK)

Career Goals Congruent with Requested Change: YES ___ NO ___

Approval of Dept Chairperson: YES ___ NO ___

Signature Date

V. ADSA Action:

Signature Date

Original to: ___ Student Record ___ Present Track Coordinator	Copy to: ___ Student ___ Present Dept. Chair ___ New Dept. Chair ___ New Track Coordinator
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