This Change of Delivery (COD) form is intended only for students already admitted to or active in the fully-online format of a program also available face-to-face (F2F), except for the RN-to-BSN, which has a separate form (found here: www.millersville.edu/onlineprograms/forms.php#COD).

You must see your advisor to discuss your options before completing this form.

This form must be completed & signed by hand by the student. Signatures of approval from both your advisor and Dept. Chair must be provided. Once completed, your form must be submitted to the Office of Online Programs; either in-person (Lyle Hall, Rm. 231), or simply send a scanned copy to OnlinePrograms@millersville.edu. If emailing, it must be sent from your Millersville email address, or the one provided to Admissions on your application (it may be rejected otherwise).

If you have any questions at all, please contact the Office of Online Programs by email at OnlinePrograms@millersville.edu or by telephone at (717) 871-7200.

Full Name: ________________________________
(Format: First Middle Last)

MU ID#: ________________________________
(E.g., M01234567)

Birthdate: ________________________________
(Format: MM/DD/YYYY or Month DD, YYYY)

Email Address: ________________________________
(If submitting via email, must match the email address from which you will be sending this form)

Current Program: ________________________________
(Preferred Starting Term: ________________________________
(BSN students must use form linked at top of page) (E.g., Spring 2019. We will accommodate this if possible)

Student Signature ____________________________ Date ___________
(By signing below, you indicate your desire to switch delivery format to face-to-face)

Advisor Signature ____________________________ Date ___________
(You must meet with your advisor before submitting this form to Online Programs)

Advisement Notes: ________________________________
(For advisor or Chair use only)

Department Chair Signature ____________________________ Date ___________