

**Advisement Update Form**  
**Greater Rochester Collaborative Master of Social Work Program**  
Nazareth College \* The College at Brockport/SUNY

Date \_\_\_\_\_

Student Name \_\_\_\_\_ Advisor \_\_\_\_\_

Brockport ID \_\_\_\_\_ Naz ID, \_\_\_\_\_

**Monitor**

- GPA ( GPA on Admission \_\_\_\_\_ )
- Needs referral to writing resources

**Plan of Study**

- 60-Credit Program**
- Full Time admission
- Part Time admission
- From Full Time to Part Time
- Individualized Plan of Study
  
- Advanced Standing Program**
- Full Time admission
- Part Time admission
- From Full Time to Part Time
- Individualized Plan of Study

**Concentration**

- Confirming
- Change
  
- Family and Community Practice**
- Interdisciplinary Health Care Practice**

**Change of Status**

- Leave of Absence
- Withdrawal from Program
- Graduate Petition needed by: \_\_\_\_\_  
For Leave of Absence
- For Course Waiver for Redundancy
  
- Withdrawal from course(s)  
Courses \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Pre-requisites needed by August of \_\_\_\_\_ Extension of pre-requisites until \_\_\_\_\_**

**Advanced Standing Courses needed as Electives (BSW course work at C or lower)**

\_\_\_\_\_ SWK 524 Human Diversity                      \_\_\_\_\_ SWK 532 or 533 SW Research

\_\_\_\_\_  
Student Signature                      Date                      Advisor Signature                      Date

\_\_\_\_\_  
Coordinator of Registration/ Field Education Director/Faculty, as needed                      Date