#### Change of Level: Master’s to Ph.D.

internationaloffice.berkeley.edu



To request your Ph.D. I-20 or DS-2019, you must submit to Berkeley International Office:

* This form completed by you and your Graduate Student Affairs Officer (GSAO)
* Proof of financial support (see Budget worksheet on page 2). *Proof of funding may be no more than 6 months old.*

**Deadline**: *Whichever is* ***earliest*** *of the below…*

* **F-1 students**: No more than 50 days after your Master’s completion date, I-20 end date or EAD End Date (if on OPT)
* **J-1 students:** No later than 10 days before your current DS-2019 End Date
* **All** Students**:** No less than 10 days before the beginning of your PhD program start Date

**Student Information**

|  |  |
| --- | --- |
| Family/Last Name: | Given/First Name: |
| Birth Date (MM/DD/YY): | Student ID: |
| Email address: | Telephone: |
| Current Status**:** F-1J-1 | End Date of current I-20 or DS-2019 (MM/DD/YY): |

International Travel Plans

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| Do you have any international (outside U.S.) travel plans between your Master’s and Ph.D. program?  Yes  No |
| If yes, dates of travel (*an estimate is ok*): Departure from U.S. :       Return to U.S. : |

Employment Plans

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| Do you plan to work between your Master’s and Ph.D. programs?  Yes, On-Campus  Yes, Off-Campus  No |
| If yes, list dates of employment: Start Date:       End Date: |

F-2 or J-2 Dependent Information. Provide information for additional F-2 or J-2 family members on a separate sheet.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Family Name: | | First Name: | |
| Birth Date (MM/DD/YY): | Spouse  Child | | Male Female |
| 2. Family Name: | | First Name: | |
| Birth Date (MM/DD/YY): | Spouse Child | | Male Female |

Academic Department Certification. Please have your Graduate Student Affairs Officer (GSAO) complete this section.

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| --- | --- | --- |
| New Ph.D. Program Name:  d | | New Ph.D. Program Plan Code: |
| New Ph.D. Program Start Date:  d | | Anticipated Ph.D. Graduation/Completion Date: |
| When will the student complete all requirements of the Master’s program? List date and/or term: | | |
| Adviser’s Name: | | Email: |
| Telephone: | Signature and Date: | |

**Budget Worksheet**

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| **Professional Fees  Per Semester & Year\*\*\*** | |
| Arch | Landscape Arch |  City Planning | Urban Design (M.Arch, MCP, MLA, MUD) | $2,167  $4,334 |
| Developmental Practice (MDP program only) | $8,534  $17,068 |
| Education (M.A.) | $1,572  $3,144 |
| Engineering (M. Eng) | $12,122  $24,244 |
| Engineering (M.S. CEE) | $4,899  $9,798 |
| Journalism (MJ) | $2,510  $5,020 |
| Law (JD) | $13,029  $26,058 |
| Law (LLM) | $17,037  $34,074 |
| MBA (Full-time) | $17,683  $35,366 |
| (MIMS) School of Information | $2,704  $5,408 |
| Optometry (OD only) | $7,806  $15,612 |
| Product Development  (MS Chem Eng) | $13,272  $26,544 |
| Public Health (MPH & DrPH) | $3,187  $6,374 |
| Public Policy (MPP) | $4,103  $8,206 |
| Social Welfare (MSW) | $1,117  $2,234 |
| Statistics  (MA in Statistics only) | $8,144  $16,288 |
| Translational Medicine (UCB based MTM only) | $15,804  $31,608 |
| UCB-UCSF Joint Medical Program | $10,142  $20,284 |

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| Please note these are estimated costs and actual amounts may vary. | | | | | | | | | |
| **Required Fees and Expenses 2019-2020** | **Undergrad** | **Graduate** (Not Advanced to Ph.D. Candidacy) | | | **Graduate**  (Advanced to Ph.D.Candidacy) | **Graduate**  **Filing Fee** (one semester) | | **Summer**  **Only** (Degree & EAP) | |
| **Tuition & Fees**  One semester | $23,703 | $17,321 | | | $9,770 | $338 | | (pre-paid) | |
| Two semesters | $47,406 | $34,642 | | | $19,540 |
| **Your Living Expenses\***  $2,100/month  One semester = $9,450  Two Semesters =$18,900 |  |  | | |  |  | | **$6,300** | |
| **Spouse (F-2/J-2) Expenses\***  $850/month  One semester = $3,825  Two Semesters =$7,650 |  |  | | |  |  | |  | |
| **Child(ren) (F-2/J-2) Expenses\***  $750/month per child  One semester = $3,375  Two Semesters =$6,750 |  |  | | |  |  | |  | |
| **Professional Fees,  if applicable** (see box at right) |  |  | | |  |  | |  | |
|  | | | | | | | | | |
| F-1 Total Expenses (max one year required) |  | |  |  | | |  | |  |
| J-1\*\* Total Expenses Multiply annual total  by years of extension |  | |  |  | | |  | |  |
| \* **Living Expenses** are calculated on a 9-month Academic Year i.e. 1 semester = 4.5 months and 2 semesters = 9 months. If  adding dependents while on Academic Training, OPT, or OPT STEM Extension you will only need to show proof of funding  for living and dependent expenses indicated for the remaining duration of Academic Training, OPT, or OPT STEM Extension.  \*\* J-1 degree-seeking students must show proof of funding for the duration of their program. At least 51% of total  cumulative financial support must be institutional, governmental, or from an employer.  \*\*\* Where necessary, professional fees have been adjusted to reflect accurate total amounts. | | | | | | | | | | |
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### Required Proof of Funding

### Attach copies of your proof of funding documents (see required documents listed below for each source of support).

### All proof of funding must be dated *less than six* months old.

### Foreign currency conversions into US$ are accepted.

### Your total funding must *equal or exceed* your total expenses above.

### Details on acceptable funding: <https://internationaloffice.berkeley.edu/students/current/proofoffunding>

|  |  |  |
| --- | --- | --- |
| **Type of Support** | **$Amount** | Documents to Attach Photocopies accepted. |
| Self Support | **$** | * Bank statement(s) or letter(s) in your name |
| University of California, Berkeley | **$** | * [Department Guarantee of Financial Support Form](http://internationaloffice.berkeley.edu/funding_documentation) **OR** Official award letter(s) from department |
| Family, Parent, or Private Sponsor | **$** | * [Private Guarantee of Financial Support Form](http://internationaloffice.berkeley.edu/funding_documentation) **OR** dated & signed letter(s) indicating the relationship between you and the sponsor(s), amount & length of support **AND** * Bank statement(s) or letter(s) from sponsor’s account |
| Sponsoring Org, Employer, Govmnt, etc. | **$** | * Award letter(s) indicating type of funding, duration, and amount of support |
| Other Support | **$** | * Statements, letters, or other types of verification |
| Your Total Funding | $ | *(Note:* *This number must match or be greater than your Total Expenses above*.) |