

## OFFICE OF GRADUATE STUDIES & RESEARCH Change of Program or Personnel

Name:	Date:
Address:	ID # :
City/State/Zip	Term:

<u>Directions</u>: Enter in the space below any changes in the approved program or personnel including **change of non-degree status**, **change of major**, **change in required courses**, and **change of guidance committee personnel**. **NOTE**: When this petition is used to request a change of major, the petition **must be approved** by the student's current advisor and Head of the department in which the prospective major is located. **Then application materials will be sent to the new department for review**.

		I. CHANGE NON-I							
		request to degree must be a							
Graduate Record Examination (GRE): Date				V	Q	S			
Miller Analogies Test (MAT): Date 7				Score					
Graduate Management Admission Test (GMAT): Date 7				Score					
Fundamentals of	Engineering Test (FE):	Date Taken		Score					
		П СНАМ	GE MAJOR						
PLEASE CHAN	GE MY MAJOR FROM		<b>JE MAJUK</b>						
Degree Seeking:	MA MAED	MBA MCJ	ME MED	MPA	MSN	EDS E	DD 🗌		
0 0	PHD MSW	MPS MOT	DPT MPH	MSW	MS				
	GE MY MAJOR TO:								
Degree Seeking:	MA MAED	MBA MCJ	ME MED		MSN	EDS E	DD		
	PHD MSW	MPS MOT	DPT MPH	MSW	MS				
III. CHANGE COURSES									
ADD:	COURSE ID	DESCRIPTION	COU	IRSE ID		DESCRIPTION			
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-				<u> </u>					
DELETE:	DELETE: COURSE ID DESCR		COU	COURSE ID		DESCRIPTION			
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-		CHANGE ADVISEMEN	T/COMMITTE	FDEDSON	NET				
PLEASE CHAN	GE MY MAJOR ADV			E I ENSUNI					
	GE MY MAJOR ADV								
	GE MY <b>CHAIR PERS</b> GE MY <b>CHAIR PERS</b>						<u> </u>		
	GE MY COMMITTEE								
PLEASE CHAN	GE MY <b>COMMITTEE</b>	E PERSON TO							
Student's Signature			Date						
	<b>Recommended by:</b>			Aı	oproved by:				
Advisor Date		Date	Dean of Grad	luate School			Date		
Dept. Head		Date							
2 opti mau		Duit							
Dean of College/	/School	Date							