
Memo

CC: Registrar, Graduate School

From: _____ SS# _____

Date:

Re: CHANGE IN PROGRAM OF STUDIES

I request that the modification listed below be made in my _____
(DEGREE)

Program of Studies.

DELETE:

Course Number (s)	Title	Credit Hours
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ADD:

Course Number (s)	Title	Credit Hours
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APPROVED:

Student Date

Adviser Date

Director of Graduate Studies Date