

GRADUATE PETITION FOR CHANGE OF MAJOR OR DEGREE GOAL

Name: LAST FIRST MIDDLE Mr. Ms. SID#:

Mailing Address: Street Address City State Zip Code

Telephone No: ()

Registration Status: New Continuing Readmit Last Term Registered:

Current Degree Goal & Major: Degree Goal (e.g., MA, MS, Ph.D.) in Major

Have you received the degree listed above? Yes No

Date received or expected degree date:

I am petitioning to: Change to Drop Add To be effective: Fall Spring 20

Degree Goal (e.g., MA, MS, Ph.D., JD, etc.) in Major

Reason for request:

Student date

For the proposed degree goal and/or major: Approved Denied
Special conditions, if any, attached to this action:
1) Signature of Official Graduate Advisor Chair Date
Noted by current major graduate advisor: (not required if degree received or for change of degree goal only)
2) Signature of Official Graduate Advisor Chair Date

GRADUATE DIVISION
Approved Denied Effective:
3) Signature of the Dean of the Graduate Division Date

OFFICE OF THE REGISTRAR USE ONLY
Posted by: Date: