

PROGRAM CHANGE REQUEST

FirstName: LastName:
 E-mail: ID#:
 Address: Degree: Bulletin Year:
 City: State: Zip Code: Major Area:
 Country: Concentration:
 Telephone: Date:

1. PROGRAM CHANGES ("old" from checksheet previously filed with Advancement to Candidacy)

		Number	Course Title	Swing Cr	> 500 Credits	Transfer Course
1	Old					
	New					
2	Old					
	New					
3	Old					
	New					
4	Old					
	New					

2. REVISED COURSE REQUIREMENT SUMMARY

	Swing Cr		> 500 Credits		Subtotal
Completed: Transfer		+		=	
AU		+		=	
Proposed: Transfer		+		=	
AU		+			
TOTALS					

Tour/workshop:
Independent Study:
TOTAL:

Note: all transfer courses must be approved by petition and an official transcript must be received by Records Office

3. ACADEMIC RECORDS

Petition Transcript

Petition

Transfer meets requirement

Meets requirements

Academic Records

Date

Advisor

Date

Department Chair

Date

APPROVAL

Dean, College of Education & International Services

Date