

Original - Dean's Office
 Copy - Graduation
 Copy - Department
 Copy - Student

AMENDMENT TO PLANNED PROGRAM OF STUDY

Master of Engineering Degree

Date _____

Name _____ Student ID # _____

Local Address _____

Street City State Zip

Major _____ Department _____

I request permission to modify my program as follows:

Delete the following:

Course Number and Name	Credit Hours	Semester/Year to be Taken	Reason for Requesting the Change

Total credit hours to be **deleted** ____

Add the following:

Course Number and Name	Credit Hours	Semester/Year to be Taken	Reason for Requesting the Change

Total credit hours to be **added** ____

Net change in credit hours: _____ **added** or _____ **deleted**

Student Signature _____ Date _____

Approval:

Supervisory Committee Chair _____ Date _____

Dept Chair/Graduate Advisor _____ Date _____

Associate Dean for Academic Affairs _____ Date _____