



PETITION FOR CHANGE OF COURSE

Date _____

I wish to receive credit for the following graduate course (s) towards the Master of _____ degree in the Department of _____.

<u>Course Number</u>	<u>Title</u>	<u>Semester Hours Credit</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The course(s) will be substituted for the course(s) listed on my degree plan as indicated below:

<u>Course Number</u>	<u>Title</u>	<u>Semester Hours Credit</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student's Signature

Student's Name (Print/ Type)

Student's Mailing Address

City/ State/Zip Code

T-Number

Approved By:

Adviser _____

Head of Department _____

Dean, College/School _____

Graduate Dean _____