

Graduate Catalog Year or Emphasis Change

STUDENT ID: _____ NAME (PRINT): _____, _____
LAST FIRST MI

Phone number: _____ TWU E-mail: _____

Degree: _____ Major: _____ _____ Doctoral _____ Masters _____ Certificate

A. Degree Plan Change

Students wishing to change to a newer degree plan must complete and submit the section below with all required signatures.

Initial Catalog Year (e.g., Fall 2013): _____ New Degree Plan Year: (e.g., Fall 2014) _____

B. Change of Emphasis / Track:

Current: _____

New: _____

*This is only for changing emphasis areas or tracks within a degree program. Contact the Graduate School for requests to change program.

I have reviewed the information with my Academic Advisor and understand that this may affect my graduation audit.

Student Signature
(attach e-mail acknowledgment from student, if not available to sign)

Academic Advisor Signature (Required)

Return completed and signed form to:

Office of the Registrar
128 ADM Building
P.O. Box 425559
Denton, TX 76204-5559
Scan and email to: registrar@twu.edu
Fax to: 940-898-3097