AMENDMENT TO FORMAL STUDY PLAN

Research and Graduate Programs

Name _____ Date _____

Address _____ Phone _____

_____ Student ID# _____

Current academic program _____

1. AMENDMENT
   The following change(s) to my formal study plan is/are being requested (*list only those courses which are being affected by this change and any additions or deletions*):

   ORIGINAL COURSES ON PLAN   CHANGES TO PLAN

   Course   Units   Grade   Qtr/Yr Planned   Course   Units   Grade   Qtr/Yr Planned

   _____   _____

   _____   _____

   _____   _____

   _____   _____

   _____   _____

   List name for subtitle courses (e.g., 500):

   Course _____ Name _____   Course _____ Name _____

2. SPECIAL REQUIREMENTS TO BE CHANGED**:** _____

   _____

3. JUSTIFICATION FOR CHANGE

   My justification(s) for the above request(s) are: _____

   _____

   _____

4. APPROVALS

   Student _____ Date _____

   Adviser _____ Date _____

   Coordinator _____ Date _____

   Dean _____ Date _____

   R & GP _____ Date _____