



**CHANGE OF DEGREE WITHIN MAJOR FORM**

Section 1: Completed by Student

Section 2: Completed by Chair/Director of Graduate Studies of the Department

Section 3: Signature of Graduate School Dean

Please Note: All sections must be completed and returned to the Graduate Records Office before a change of degree will be considered.

**Section 1: To be completed by the Student**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

DAWG Tag: \_\_\_\_\_ Department: \_\_\_\_\_

Current Degree: \_\_\_\_\_ Desired Degree: \_\_\_\_\_

Semester/Year in Which Change of Degree is to Begin: \_\_\_\_\_

\_\_\_\_\_  
Student's Signature Date

**Section 2: To be completed by Chair of the Department**

Chair of Department has met with the student and has been advised of the student's intent to change degree.

Chair Comments (if any) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Department Chair / Director of Grad Studies Date

**Section 3: Signature of Dean of Graduate School**

Approved  Yes  No

\_\_\_\_\_  
Dean, Graduate School Date