

Texas A&M University-Kingsville Research and Graduate Studies College Hall Room 150 MSC118 Kingsville,TX 78363 361.593.2808

## Change in Major, Degree or Degree Plan Form

		_, request that	
(Current Graduate Coordinator)			(Student Name)
K#, k	be changed in Major, Degree, or Degree Plan from		
to		effective ———	
☐ Student has requested to change ma	jor (must attac	h an updated deg	ree plan)*
☐ Student has requested to change deg	gree [(ex: MS t	o MA) must atta	ch an updated degree plan
☐ Student has request to change degree			
	1	1	
from	to		
☐ Other (Please state reason)			
pproved:			Date:
(Print, Student )	(Stud	ent signature)	<del>-</del>
pproved:			Date:
Print, Current Graduate Coordinator	Signature of Curre	ent Graduate Coordina	ator
pproved:			Date:
Print, Graduate Coordinator	Cianatura of (	Graduate Coordinator	
(of Department student is transferring to)		student is transferring	to)
and the second s			Data
pproved: Print, Department Chair			Date:
(of Department student is transferring to)		Department Chair tudent is transferring	to)
Approved:	(or Department	tadent is transferring	Date:
(VP for Research and Dean of Graduate S	tudies)		
* International students' change of major must	also be approved	by the Internation	al Student Office.
		•	
* For International Students Only:	(Check one)	Approved	Disapproved
PSDO Signature:		Date	e:
cc: Registrars			
Department			
Graduate Studies Office			

Revised: JULY 2017