OFFICE OF THE REGISTRAR MSC 105, 1050 W SANTA GERTRUDIS AVE KINGSVILLE, TEXAS 78363-8202 PHONE (361)593-2811 \* FAX (361)593-2195

www.tamuk.edu



## CHANGE IN MAJOR, DEGREE OR DEGREE PLAN FORM

		, request that	
	(Current Graduate Coordinator)		(Student Name)
	K#,I	be changed in Major, Degree, or Degree Pl	an from
	to	effective	
$\square$ s	Student has requested to change m	najor (must attach an updated degree	e plan)*
		egree [(ex: MS to MA) must attach	_
_	•	ree plan (must attach an updated deg	
	rom	to	
	Other (Please state reason)		
	The state reason,		
approved:			Date:
	(Print, Student)	(Student signature)	
pproved:			Date:
	Print, Current Graduate Coordinator	Signature of Current Graduate Coordinator	
Approved:			Date:
	Print, Graduate Coordinator	Signature of Graduate Coordinator	
	(of Department student is transferring to)	(of Department student is transferring to)	
Approved:		,	Date:
	Print, Department Chair	Signature of Department Chair	
	(of Department student is transferring to)	(of Department student is transferring to)	
Approved:			Date:
	(VP for Research and Dean of Graduate S	otudies)	
	* International students' change of r	major must also be approved by the Intern	ational Student Office.
	* For International Students Only: (C	Check one) Approved Disa	pproved
	PDSO Signature:	Date:	
For Reg	gistrar's Office use only: Processed By	Date	