School of Graduate Studies Request for Program Change May 2024

First Name:	Full-time	Part-time	
Last Name:	Full Program Name:		
Student ID Number:	Degree:		
Please select from the options below:			
 Not proceed with Ph.D. studies but apply for the Master's degree (student's signature NOT required) Transfer from one program to another within the same department ** PhD Supervisory Committee member signatures are required if student is leaving PhD Career ** 			
Comments (please give reason for change):			
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