AUBURN
UNIVERSITY

GRADUATE SCHOOL

DOMESTIC REQUEST FOR CURRICULUM CHANGE
(submit one printed copy)

_____ would like to request a curriculum change from

Student Name

_____ to _____.

Current Program   Proposed Program

If you are not replacing your current program with the proposed,
you will need to specify the priority of your added program.

- o   Add my proposed program as first priority
- o   Add my proposed program as lower priority
- o   Do not inactivate my current plan of study

Current Advisor:

Proposed Advisor:

Assistantship Status:

- o   No assistantship
- o   Will continue on present assistantship
- o   Has been awarded a new assistantship

Effective term of this change is _____, _____.

Approved By:

_____   _____   _____   _____
Current Advisor   Date   Department Head of Old Curricula   Date

_____   _____   _____   _____
Proposed Advisor   Date   Department Head of New Curricula   Date

_____   _____   _____   _____
Associate Dean Research   Date   Dean of the Graduate School   Date
and Graduate Program