

## PETITION FOR CHANGE IN GRADUATE PROGRAM OF STUDY

Date:	Studen	Student UAH Email:					
Student Name:				Stu	ident A N	0.:	
Department/Program:				Degree:			
Thes	is Non-Thesis	Doctora	al				
UAH Course	Title of Cou	rse	Credit Hours	Grade	Term	Name of Institution if transfer course request*; remarks	Transfer Course #
Courses to	be deleted:	L. L				*Include a copy of transcript	t if applicable
Courses to	be added:	I		II		I	
Reason for cl	-			Othory			
Stud	ent Preference C	Iniversity Cause		Other:			
Approval Sig	natures:						
Student:				Date:			
Advisor:				Date:			
Department:	:			Date:			
Graduate Sch	nool:			Date:			