



## REQUEST FORM FOR CHANGING PROGRAM / CURRICULUM (GRADUATE STUDENT)

Date: .....

To: Assistant Director for Academic Affairs

From:  Mr.  Ms.  Mrs. .... Student ID: .....

Telephone No.: ..... Semester:  1<sup>st</sup>  2<sup>nd</sup>  Summer Academic Year: .....

Signature: .....  
(.....)

Date: .....

Request to change program from ..... to .....

<p>1. Comments from Advisor :</p> <p>.....</p> <p>.....</p> <p><input type="checkbox"/> Recommended for approval</p> <p><input type="checkbox"/> Not recommended</p> <p>Signature: .....</p> <p style="text-align: center;">(.....)</p> <p>Date: .....</p>	<p>2. Comments from Head of School :</p> <p>.....</p> <p>.....</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Disapproved</p> <p>Signature: .....</p> <p style="text-align: center;">(.....)</p> <p>Date: .....</p>
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Request to change curriculum from ..... to .....

<p>1. Comments from Advisor :</p> <p>.....</p> <p>.....</p> <p><input type="checkbox"/> Recommended for approval</p> <p><input type="checkbox"/> Not recommended</p> <p>Signature: .....</p> <p style="text-align: center;">(.....)</p> <p>Date: .....</p>	<p>2. Comments from Head of School :</p> <p>.....</p> <p>.....</p> <p><input type="checkbox"/> Recommended for approval</p> <p><input type="checkbox"/> Not recommended</p> <p>Signature: .....</p> <p style="text-align: center;">(.....)</p> <p>Date: .....</p>
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3. Assistant Director for Academic Affairs :  Approved  
 Disapproved

By the ...../..... Joint Academic and Executive Committee Meeting on ...../...../.....

Signature: .....  
(.....)

Date: .....