

Student ID: _____ **First Name:** _____ **Last Name:** _____
Program: _____

Advisor/Committee

The initial appointment will be completed with the program of study, this form is for changes only.
 If a new member is not UND Graduate Faculty, you must attach their CV:

Action	Current Member	New Member	New Member Signature

Comments:

Program of Study

ADD			
Dept	Course	Title	Credit

REMOVE			
Dept	Course	Title	Credit

*If you need to make more changes than fit on this form, please submit a new program of study form.

Degree Change/Addition - Same Program

Degree Change: _____
 Subplan/Specialization/Concentration: _____
 Degree Addition: _____ Add: _____
 Delivery Method: _____ Remove: _____

*You may only change degrees within the same program
 *To pursue an additional degree in a different program, you must complete a new admission application
 *To change your degree, you may need to submit a new program of study, topic proposal and/or committee change

Student Approval

Student	Date

Program Approval

Advisor	Date	Graduate Program Director	Date

SGS Review

School of Graduate Studies	Date

Comments:

SAMPLE