



CHANGE OF DEGREE WITHIN MAJOR FORM

Section 1: Completed by Student

Section 2: Completed by Chair/Director of Graduate Studies of the Program

Section 3: Signature of Graduate School Dean

Please Note: Sections 1 and 2 must be completed and returned to the Graduate Records Office before a change of degree will be considered. Email form to gradschl@siu.edu.

Section 1: To be completed by the Student

Name: _____

Address: _____

DAWG Tag: _____ Major: _____

Current Degree: _____ Desired Degree: _____

Semester/Year in Which Change of Degree is to Begin: _____

 Student's Signature Date

Section 2: To be completed by Chair/Director of Graduate Studies

I have met with the student, and I am aware of the student's intent to change degree.

Comments(if any) _____

Chair/Director of Graduate Studies Approval:

 Printed Name Signature Date

Section 3: Signature of Dean of Graduate School

Approved Yes No

 Dean, Graduate School Date

Graduate School notified the Center for International Education (CIE) of this change.
 (International Students Only) _____
 Date