
Thesis/Research Project Option Change Request

Please print this form and deliver to Graduate Programs at 206 Showalter Hall

Name: _____ Student ID: _____

E-mail Address: _____

Degree you are studying: _____ Graduate Program/Department: _____
(MS, MM, MA, etc)

Expected Graduation Term: _____

Will you be **CHANGING** your option to a:

Research Project

Thesis

I approve and support the request for the change of this students thesis/research project option

Committee Chair (TYPE or PRINT)

Sign

Date

By signing and submitting this form you are giving Graduate Programs the approval to have Records and Registration change the course numbers as they appear on your transcripts.

**Please note that this change can only be made once.*

Student Signature

Date

Once your request has been approved you will receive an email from Graduate Programs.