

THE UNIVERSITY OF TENNESSEE
Graduate Admissions

REQUEST FOR CHANGE OF GRADUATE PROGRAM

Advanced degree(s) granted by The University of Tennessee and Date (s) _____ Student ID# _____

Received _____
 (Last Name) (First Name) (Middle Name)

Present Admission Status:

 (Degree/Certificate) (Mailing Address)

 (Major) (City) (State) (Zip Code)

 (Last date in attendance at UT) Email _____

 (Releasing Major Department Head's Signature) Telephone # (_____) _____

No signature is needed if you are changing from non-degree to a degree program or from one degree to another in the same department.

Proposed Changes in Admission

Effective _____ Term

 (Degree/Certificate)

 (Major)

 (Student's signature)

 (Date)

NO action is taken until a file is complete.

FOR OFFICE USE ONLY		
	Received	Needed
Request Form	_____	_____
UT Transcript	_____	_____
Transcript From	_____	_____
GRE Scores	_____	_____
V. _____ Q. _____ An _____ Adv. _____		
Referred to	Date Sent	Returned
_____	_____	_____
Admitted _____	Denied _____	NAT _____