

College of Graduate Studies

For questions please call (361)-825-2177

Change of Entry Term

Request Form

Student Name:			Student ID#		
Phone:			Date Submitted:		
Email:			Current Term of Entry:		
New Term Requested:		Canc	celation Request: Yes		No Please circle one
Description of Change:					
L					
EFFECTIVE JUNE 1, 2011: Graduate applicants wishing to change programs will be required to submit a separate application, fee, and all required documentation. <u>Applicants requesting to change term of entry within the year may request this change <i>one</i> more time without submitting a new application fee.</u>					
Signature Date					
(For Nursing Stu College of Nursi (Cohort Availabi	ng & Health Sciences Approval:				
Graduate Admission Coordinator Approval:					