Research & Graduate Studies

Change or Addition of Graduate Degree Program Form

Please provide student information:

Full Name:_____ T-Number:_____

ATU Email Address:_____ Phone:_____

Current Program**:** _____

Has student applied for graduation?

☐Yes ☐No

Please select one of the following and fill in the new program's information:

☐ Changing to New Program:_____

☐ Adding a Graduate Certificate:_____

☐ Adding a Second Master's/EDS program (concurrent):_____

If student is adding a concurrent master's program or EDS program, please indicate the reasoning/plan for successful completion below:

Student:_____ **Date**:_____

Current Program Director:_____ **Date**:_____

New Program director:_____ **Date**:_____

Graduate College (processing):_____ **Date**:_____

PLEASE OPEN DOCUMENT IN ADOBE TO SIGN DIGITALLY

H*aving Trouble? Read this: https://www.atu.edu/orgs/gradcollege/docs/signature_instructions.pdf*

Concurrent Enrollment Approval

Graduate Dean:_____ **Date**:_____

This form must be completed by any graduate student who has already been admitted into a graduate program. Once completed by all parties, please submit to gradcollege@atu.edu --- PLEASE OPEN DOCUMENT IN ADOBE TO SIGN DIGITALLY USING SIGNATURE FIELD. ADOBE WILL REQUIRE YOU TO SAVE A NEW COPY AFTER SIGNING.