

## The Graduate School degreesandcertificates@montana.edu

## STATE UNIVERSITY Graduate Program Change

						Stude	ent ID #	
Last Name	ast Name		First Name in Degree		Middle Initial	Emai	1	
Department		De			Degree Title			
Once a Progr minimum req	am of Study has	been approved it m	nay be revised upon	the advice of	of the commit	tee chair. A	revised Program	Study & Committee form n of Study must meet th No fee is associated wit
Remove:								
Rubric	Course #	Course Title			Cı	Credit	Year	Semester
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Rubric	Course #	Course Title				Credit	Year	Semester
Approval:								
Committee Chair Signature			Date	 De	epartment Head Signature Date			Date
Student Signa	nture		 Date	_ <del>_</del>	ne Graduate S	chool		 Date