## Graduate Degree Plan Change Form

COLLEGE OF MUSIC		U	IN	ÍΤ <sup>°</sup>
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(Last, First, MI)

Date: UNT ID#:

Degree/Major:

Name:

Email:

Include course prefix, number and title and a reason for the degree plan change.

## **Graduate Course Changes**

	Delete from Degree Plan		Substitute on Degree Plan	]	Reason
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Graduate Advisor				Date	
		(signature)			
Director of Graduate Studies				Date	
Diffector of	Graduate Studies	(signature)		Date	
D T. 1				Date	
Dean, Toulouse Graduate School (signature)					
		(Signature)			