

Biotechnology and Biomedical Engineering Masters Program Petition to Alter Course of Study

Student Information		
Last Name	First Name	Middle Initial
Banner ID Number	Program	Advisor

List courses applied from your undergraduate degree (For 5th year masters only)

Course Number	Grade Received

List courses completed towards your masters degree

Course Number	Grade Received

List courses you plan to take and the semester you will take it

Course Number	Semester

Please indicate the reason for why you wish to alter your course of study:

Please indicate below your previous expected date of completion (EDOC)(mm/yr)

Pending approval please indicate below your new EDOC (mm/yr)

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Student Signature

Printed Name

Date

Advisor Signature

Printed Name

Date

Any request to change your path to completion must be received two weeks before the first day of classes of the semester in which you wish to make the change. Failure to file this petition will result in very high charges from the Registrar that may not be undone