



# Graduate Change of Program

MSU ID# \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Last First Middle

Current Mailing Address: \_\_\_\_\_  
Street  
 \_\_\_\_\_  
City State Zip

E-mail Address: \_\_\_\_\_

**Instructions: Enter all applicable items of previous information in Column A, all current items in Column B, and sign and date below.**

Column A (From)	Column B (To)
Advisor _____	Advisor _____
Degree or Certificate _____	Degree or Certificate _____
Subject area _____	Subject area _____
Catalog _____	Catalog _____

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing above, I understand that this is a **REQUEST** to make changes to my graduate program and departmental approval will be required before changes are final.

This form should be submitted directly to the appropriate admissions office in person, by mail, fax, or scan and email. The student's signature is required before processing.

International students – International Admissions, Woods Hall. Fax: 270-809-3211  
 msu.intl@murraystate.edu

US Citizens or resident alien students – Graduate Admissions, B2 Sparks Hall. Fax: 270-809- 6125  
 msu.graduateadmissions@murraystate.edu