



Office of Graduate Scholars
 1128 Scott Hall
 Ph: (313) 577-1455
 Fax: (313) 577-8956

MEMORANDUM

SUBJECT: CHANGE IN M.S. PLAN OF WORK

FROM: _____ BMS

TO: Graduate Programs Office, 1128 Scott Hall M R

DATE: _____ Other _____

STUDENT: _____

Last	First	I.D.#:
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COURSES TO BE DELETED

Term	Course & No. / CRN#	Credit Hrs
_____	_____ / _____	_____
_____	_____ / _____	_____
_____	_____ / _____	_____

COURSES TO BE ADDED

Term	Course & No. / CRN#	Credit Hrs
_____	_____ / _____	_____
_____	_____ / _____	_____
_____	_____ / _____	_____

This will change _____ (not change _____) the total number of hours in student's degree program from _____ to _____ hours.

 ADVISOR'S SIGNATURE

 PROGRAM DIRECTOR'S SIGNATURE