

COLLEGE OF WILLIAM AND MARY
School of Marine Science/Virginia Institute of Marine Science

APPLICATION FOR CHANGE OF DEGREE PROGRAM

STUDENT: _____ DATE OF ENTRY _____
(Please Print Name)

RESEARCH TOPIC: _____

Date: _____ Signature of Student: _____

PLEASE ATTACH A STATEMENT TO THIS APPLICATION BRIEFLY DESCRIBING YOUR REVISED TIME TABLE FOR THE MASTER'S DEGREE AND THE REASONS YOU WISH TO CHANGE DEGREE PROGRAMS

ADVISORY COMMITTEE RECOMMENDATION
(SIGNATURES OF ALL ADVISORY COMMITTEE MEMBERS REQUIRED)

This is to certify that members of the Committee of _____ recommends that he/she be allowed a change in degree programs from the Doctor of Philosophy to the **Master of Science**.

Advisory Committee Signatures

MAJOR ADVISOR OR CO-ADVISOR _____

RETURN THIS APPLICATION TO: Academic Status & Degrees Committee, c/o Graduate Registrar **Watermen's 253**

ACADEMIC STATUS and DEGREES COMMITTEE RECOMMENDATION

RECOMMEND / DO NOT RECOMMEND
(Comments on Reverse Side)

DATE: _____
CHAIRPERSON, ACADEMIC STATUS & DEGREES COMMITTEE

ACTION OF THE ASSOCIATE DEAN OF ACADEMIC STUDIES

APPROVED / DENIED
(Comments on Reverse Side)

DATE: _____
ASSOCIATE DEAN OF ACADEMIC STUDIES