

## GRADUATE STUDENT REQUEST FOR PROGRAM RESIGNATION AND TRANSFER

To be used by students who wish to resign from one graduate program and transfer to a lesser degree program or certificate in the same discipline

Student's GNumber:		-		
Student's Name:  Last Na	ame	First Name		
		This Hame		
Student's Current Program:	Degree (i.e. PhD, MS, MA)	Program Name		
Student's Requested Program:				
graduation application dea submitted.	Degree (i.e. MS, MA, CERG) the current semester is planne dline. If the deadline is missed	, a late graduation applicat	•	
<ul> <li>If the student is readmitted grades of F or unsatisfactor reaching the termination th concerning re-admission. If</li> </ul>	nal degree program will be noted to the same graduate program by grades accumulated within someshold. Academic units and post, so, those restrictions apply. See	n at Mason from which the ix years prior to readmission rograms may have addition to AP.6.6 for more information.	on shall count toward nal restrictions ation.	
If you have met the requirement processed.	nts for your requested program	n, please <u>apply to graduate</u>	once this form has been	
If approved, I understand that the deadline is derived from the te			and that the graduation	
Student's Signature:		Date: _	Date:	
<ul> <li>For current PhD studer that is submitted 6 yea</li> </ul>	ermaton and approval  anal credit requirements will be  ats who are requesting transfer  rs after admission into the PhD  te Associate Provost approval.  resignation should occur (must	to a master's or certificate program will require a sep	e program, any request parate <u>time limit</u>	
Department Chair:		Date:		
Program Director:		Date:		
Academic Dean:		Date:		
Assoc. Provost (if required):				