

## **The Graduate School**

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## STATE UNIVERSITY Graduate Program of Study Revision

						Student ID #			
Last Name		First	First Name		Middle Initial	Email			
Department		Degre	ee	in	Degree Title				
Once a Progr minimum req	am of Study has	been approved it may	be revised upon	the advice of	f the committee	chair. A	revised Progran	Study & Committee form of Study must meet the No fee is associated with	
Remove:									
Rubric	Course #	Course Title			Cre	edit	Year	Semester	
Add:									
Rubric	Course #	Course Title			Cre	edit	Year	Semester	
·					·				
Approval:									
Committee Chair Signature			Date	De	Department Head Signature Date				
Student Signa	ature		Date	$ \overline{Th}$	The Graduate School Date				