

Additional Curriculum Request Form

This form can be filled out with Adobe Acrobat and then printed for signatures.
Incomplete forms will not be processed and will be returned.
Any questions may be directed to 979-845-1089 or degree-audit@tamu.edu.

Name: _____

Student ID Number: _____

Program Code: _____

Catalog Term: _____

Expected Graduation Term: _____

Degree Candidate: yes no

This is a request to: Add Remove

Additional Program: _____

Additional Concentration: _____

Additional Requirements**

Total Hours Completed: _____

Current GPA: _____

*** Each credential (degree or certificate) awarded by Texas A&M University has its own unique program requirements. Please contact the academic department or college which offers the desired credential to determine if there are additional requirements a student must meet at the time of application.*

Comments:

Student: _____ Date: _____
(Printed Name) (Signature)

Primary Academic Advisor: _____ Date: _____
(Printed Name) (Signature)

Secondary Academic Advisor: _____ Date: _____
(Printed Name) (Signature)

Primary Dean/Designate: _____ Date: _____
(Printed Name) (Signature)

Secondary Dean/Designate: _____ Date: _____
(Printed Name) (Signature)