TEXAS TECH UNIVERSITY, COMPUTER SCIENCE DEPARTMENT – DEGREE PLAN CHANGE FORM

Complete and submit no later than your graduation semester (several weeks before graduation would help). If applicable, attach the course transfer application form (with official transcript) and/or the non-CS course application form.

PLEASE FILL IN THIS FORM COMPLETELY AND CLEARLY BY TYPING OR PRINTING USING A MEDIUM POINT, BLACK OR BLUE INK PEN.

Personal Information				
Name:			ID	
Last Name	First Name	Middle Name		
E-Mail Address:	Work Phon	e:	Home Phone:	
Degree (Check One): ☐ PhD ☐ MSCS ☐ MSSE ☐ SE Certificate				
MSCS/MSSE Option (Check One): Thesis Project/Report Exam				
Graduation Date Change				
New Expected Graduation Date Month_		Year	-	
Remove Courses				
Course Num/Title		Course Num/Title		
Course Num/Title		Course Num/Title		
Course Num/Title		Course Num/Title		
Add Courses				
Course Num/Title		Course Num/Title		
Course Num/Title		Course Num/Title		
Course Num/Title		Course Num/Title		
Remove Committee Members (PhD, master's thesis & non-thesis project/report options)				
Name/Dept		Signature		
Add Committee Members (PhD, master's thesis & non-thesis project/report options)				
Name/Dept		Signature		
Thesis/Project/Report Title Change (PhD, master's thesis & non-thesis project/report options)				
New Thesis Title				
Student Signature I certify that this degree plan change form is true and correct at the time of submission.				
Signature: Date:				
Graduate and Committee Advisor Signatur	res			
Graduate Advisor:	Date:	Committee Advisor:	Date:	