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Name:

KSU ID#:

Phone Number:

KSU Email:

Graduate Program:

Major:

Concentration:

Term and Year Entered Graduate College:

Catalog Year you wish to change to:

Petitioned to Graduate:      Yes      No

*I have reviewed the degree program for my major and, if applicable, concentration and would like to continue my studies under the new catalog year listed above. I understand that by choosing to switch to the new catalog year, I am required to meet ALL graduation requirements including any program GPA requirements for that program for that year.*

Student Signature:

Date:

Program Director Signature:

Date: