

Thesis Option Change Request

Student Name:	Student ID:		
Program of Study:	Concentration:		
Instructions: Please complete this form	if you wish to change from	a thesis to a non-thesis option in your Mas	ster's program of study.
Reason for the requested	change and comments con	cerning completion of program requirem	ents:
I have completed	hours of thesis cred	hours of thesis credit, taken during (academic term/s)	
		(academic te	rm/s)
Student Signature		Date	
Program Justification for	Change (to be completed by	y Program Director):	
Signatures:			
Adviser	Date	Program Director	Date
 Thesis Director	Date	Graduate Student Services	 Date

Completed forms may be submitted to The Graduate School Offices (Holland Yates Hall, MSC 6702) or emailed to gradstudentservices@jmu.edu.