



Request to Change Campus/Concentration/Degree Level/Add Secondary Concentration

Name _____ 9-digit ID _____ Net ID _____
Last First Middle Initial

Note the Following:

- Information regarding when a new application is required can be found in the [Graduate Catalog](#) under [Admissions Procedure](#).
- Changes reflected on this form will take effect for the following term, unless student will be graduating during the current semester.
- Departments can return this form to The Graduate School at recordchange@grad.msstate.edu.

Current Record

Degree: _____

Major: _____

Concentration: _____

New Record

Degree: _____

Major: _____

Concentration: _____

Secondary Concentration: _____

Campus Change ***

Current Campus: _____

New Campus: _____

Will student apply for graduation during the current term? Yes No

Typed / Printed Name

Approval Signatures

Student	_____	_____
Major Professor	_____	_____
Graduate Coordinator	_____	_____
Department Head (If Applicable)	_____	_____
College Dean (If Applicable)	_____	_____
Meridian Dean *	_____	_____
Graduate School Dean **	_____	_____
Provost Office ***	_____	_____

*Required ONLY when changing to or from Meridian Campus.

**Required ONLY for students in Unclassified Status.

*** Required for ALL campus changes.