



Change of Term Form

Student Name: _____ Student ID: _____

Major: _____ Campus: _____

Telephone Number: _____ E-mail Address: _____

Mailing Address: _____

I have been admitted to the College of Graduate Studies at Tarleton State University and would like to change my admission term:

FROM _____ **TO** _____
Current term *New term*

I understand that I can only change my enrollment term one time within one academic year of my original enrollment/application term. If the original graduate application on file with the College of Graduate Studies is more than one year old, I understand that I must submit a new graduate application and fee before being eligible for readmission.

Student signature

Date

Submit this form to the College of Graduate Studies (Grad-Docs@tarleton.edu)
Contact College of Graduate Studies (254/968-9104) with questions.

For COGS Use Only

_____ Date Received

_____ Student Notified