

**TENNESSEE TECH REQUEST FOR CHANGE  
OF GRADUATE MAJOR AND/OR CONCENTRATION**

Name of Student: \_\_\_\_\_

Student T #: \_\_\_\_\_

Student email: \_\_\_\_\_@students.tntech.edu

**Change FROM:** \_\_\_\_\_  
Degree Level (MA, MBA, MEd, MPS, MS, MSN, PSM, EdS, PhD)

\_\_\_\_\_  
Major

\_\_\_\_\_  
Concentration

**Change TO:** \_\_\_\_\_  
Degree Level (MA, MBA, MEd, MPS, MS, MSN, PSM, EdS, PhD)

\_\_\_\_\_  
Major

\_\_\_\_\_  
Concentration

By affixing my signature below, I am giving permission for College of Graduate Studies to change the major and/or concentration as requested above. I also understand that there may be additional admission criteria for the new major/concentration that I must meet.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

College of Graduate Studies Designee: \_\_\_\_\_ Date: \_\_\_\_\_