

**UNIVERSITY OF SOUTH ALABAMA
GRADUATE SCHOOL
CHANGE FROM THESIS TO NON-THESIS OPTION**

TO: _____
 Department (program) _____ College _____

FROM: _____ **J00** _____
 Name _____ Student Number _____

_____ _____ _____ _____
 Street Address _____ City _____ State _____ Zip _____

I request that my program be changed from thesis to non-thesis option. Please consider my thesis credit hours for project or directed independent studies hours (DIS).

 Student's Signature _____ Date _____ E-Mail _____

I approve this request and assign the following grade: _____
 Thesis Chair _____ Date _____

Please transfer credit and assign a grade to the courses indicated:

Thesis Course #	Thesis Term	# of Hrs.	Project Course #	DIS Course #	Grade

Note: If no project or DIS transfer credit is indicated, a WD will be assigned to the thesis hours.

Department Chair: _____ Date: _____

Graduate Director: _____ Date: _____

This document constitutes formal notification of the dissolution of the Thesis Committee.

TO: Office of the Registrar

FROM: Dean of the Graduate School

The above named student has been changed from the thesis to project/independent study. Please assign a grade to the courses indicated.

 Dean of the Graduate School _____ Date _____

Final Distribution: Registrar (original), Graduate Dean, Graduate Director,
Department Chair, Committee Members,