SMU | PERKINS
SCHOOL OF THEOLOGY

INSTRUCTIONS:

1. When changing degree programs, a student is *changing* degree program through the Registrar's Office by midterm of the first semester in current degree program. The student will meet with the Registrar to conduct a degree review.

2. Complete this form, obtain an unofficial copy of your SMU transcript and degree progress review sheet, and secure the signature of your faculty advisor or other faculty member on this form.

3. **You** will need to have all documents listed in (2) before arranging, having the review conversation with as well as obtaining the signature of each of the following: the Director of Student Services, Associate Dean of Academic Affairs, Registrar, and Director of Internship Program (if M.Div. or M.A.M. is involved either way in the change).

4. Upon completion of noted conversations and signatures, return the form and documents to the Registrar's Office for the final signature and to complete the process.

5. Please note: Changing degree programs may sometimes have an impact on financial aid, scholarships, tuition benefits, and other financial resources. Therefore, a conversation with the Director of Student Services is strongly suggested, and a signature of approval is required.

Date:_____/_____/_____   SMU Student ID #:_____

Last Name:_____   First Name:_____   Middle Name:_____

Current Degree Program: ☐ M.Div.   ☐ M.T.S.   ☐ M.A.M._____   ☐ M.S.M.

Requested Degree Program: ☐ M.Div.   ☐ M.T.S.   ☐M.A.M._____   ☐ M.S.M.

Statement: Please provide a brief statement (or attach a separate document) concerning your discerned goals and rationale for changing Perkins degree program. (250 word max)

Student Signature:_____   Date:_____

Perkins Faculty Advisor/Member Signature:_____   Date:_____

The following signatures are required to complete this form:

Registrar:_____   Date:_____

Director of Student Services:_____   Date:_____

Director of Internship: (if MDiv/MAM involved either way)_____   Date:_____

Associate Dean of Academic Affairs:_____   Date:_____

Registrar:_____   Date:_____

☐ Approved   ☐ Denied