**Graduate College**
Academic Affairs Office
University of Iowa
205 Gilmore Hall
Iowa City, Iowa 52242-1320
319-335-2144
grad.uiowa.edu

# Change in Plan of Study Form

Reset Form

INSTRUCTIONS: Complete form, obtain advisor and departmental signatures, and e-mail to gradcoll@uiowa.edu. When the change has been approved by the Graduate College, a copy will be uploaded to MAUI Advising Notes.

Name _____ Student Number _____

Program of Study _____ Degree Objective _____

## ADD TO PLAN OF STUDY

| Course Number | Course Title | Semester Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

## DELETE FROM PLAN OF STUDY

| Course Number | Course Title | Semester Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Advisor's Signature _____ Date _____

Department Executive's Signature _____ Date _____

Graduate College Dean's Signature _____ Date _____