

GRADUATE COLLEGE

Request for Adjustment of Academic Requirements

Student Information:

Student Name _____ Date _____

Student ID Number _____ Email _____

Graduate Program _____

Catalog Year _____ Anticipated Completion Date _____

Instructions:

Purpose: The *Request for Adjustment of Academic Requirements (RAAR)* form is used to modify the student's program requirements as previously approved on the *Application for Admission to Candidacy*. Consequently, an RAAR can only be submitted AFTER an AAC form has been submitted to and approved by the Graduate College (simultaneous submission of the two forms is acceptable). If approved, the academic adjustment becomes an official part of the student's program and his/her Candidacy document.

Procedure: To evaluate an RAAR the Graduate College must have complete and accurate information regarding each proposed modification. For each course this includes: the course name and number, semester and year, and the number of credits. Provide additional information if it will assist in evaluating the request. A justification for the proposed academic adjustment must also be included. The student is responsible for completing and signing the RAAR and obtaining the signature of the Program Coordinator. A list of current Graduate Coordinators is located at the graduatecollege.boisestate.edu website under forms, Current Graduate Coordinators. Once signed by the Program Coordinator the RAAR should be sent to the Graduate College. When the RAAR is approved by the Graduate College, the student is notified by email.

Adjustment:

Proposed Adjustment: (check one) Course substitution Other

Course substitution: (e.g., course to be replaced = BIOL 527 Stream Ecology, Summer 2015, 3 credits, new course = BIOL 533 Behavioral Ecology, Spring 2014, 3 credits)

Course to be replaced _____ Semester /Year _____ Credits _____

New course _____ Semester /Year _____ Credits _____

Other: (Please describe requested adjustment in detail)

Reason for the proposed adjustment:

Signatures:

Student _____ Date _____
Signature _____ Print name _____

Approved / Disapproved

Program Coordinator _____ Date _____
Signature _____ Print name _____

Graduate Dean _____ Date _____
Signature _____ Print name _____

Boise State University, Graduate Admission and Degree Services, Riverfront Hall, Room 307, 1910 University Drive, Boise, ID 83725-1110. Office hours are 8-5 Monday-Friday.
Telephone: Local 208-426-3903, Toll Free 1-800-824-7017, Fax 208-426-2789. Email: gradcoll@boisestate.edu. Website: <http://graduatecollege.boisestate.edu/>.

Distribution: Original to Graduate Admission and Degree Services; copies to Registrar, Program Coordinator, and Student.