Andrews & University

MASTER'S PROGRAM COURSE UPDATE

Name:			lD:	
Name:School:		Department:	···	
Degree: Con	centration/Er	nphasis:		
Anticipated Graduation Date:		Bulletin:		
	COURSE	TO BE UPDATE	D	
Number Course Tit	le	Credits	Grade	Quarter Taken
	МЕТНО	D TO BE ÚSED		
☐ Examination ☐ Reading Pr	roject 🗆 Spe	ecial Project □ Intervi	ew □ Other	
Description of updating require				
	Paym	•	Winter Sp	oring Summer
Student I have agreed to work with the	Date above named	d student to update his/h	ner course wor	k.
Teacher's Signature	Date	Department		
Department Chair/Program Director	Date	School Dean/Graduate I	Program Coordinat	or Date
Graduate Dean	Date	 		
The student has satisfactorily o	completed the	requirements for update	ting this cours	e.
Teacher	Date			