Return to: California State University, Fresno
Division of Research and Graduate Studies
Frank W. Thomas Building, Room 130
5241 N. Maple Avenue, M/S TA51
Fresno, CA 93740

PROGRAM ADJUSTMENT REQUEST FOR THE CERTIFICATE OF ADVANCED STUDY (CAS)

This form is required for making modifications to a student's previously approved *Proposed Program for the Certificate of Advanced Study*. It is strongly recommended that the student obtain Graduate Division approval for these changes prior to enrolling in coursework listed on this form.

Name_____ **Student ID**_____
Last First Middle

Address_____
Street City State Zip Phone

COURSE(S) TO BE ADDED TO CAS PROGRAM:

Course prefix, number and title	Where taken	Term	Year	Units	Grade

COURSE(S) TO BE REMOVED FROM CAS PROGRAM:

Course prefix, number and title	Where taken	Term	Year	Units	Grade

REASON FOR THIS REQUEST:_____

Required Signatures:

Coordinator, Certificate of Advanced Study Program Date

Student Date

(For use by the Division of Research and Graduate Studies Office only)

❑ Approved ❑ Partially Approved ❑ Denied Comments:

Dean, Division of Research and Graduate Studies Date