## **Bachelor of University Studies**

## North Dakota State University

Request to Change an Approved BUS Degree Plan

Ceres Hall 306 70

701-231-6313

|            |                  |                          | editing, must be comp |  | DATE:                           |                  |  |
|------------|------------------|--------------------------|-----------------------|--|---------------------------------|------------------|--|
| 1 12 11    |                  |                          |                       |  |                                 |                  |  |
|            | All              | requests r               | nust be submitte      | d and approved prior to enrolln        | nent in the course              |                  |  |
|            |                  |                          | 1                     | Course to be Deleted                   |                                 |                  |  |
| 1-         | Institution      | Course                   | Number                | Course Title                           | Credits                         | Term<br>Enrolled |  |
| 1          |                  |                          |                       |  |                                 |                  |  |
| 2          |                  |                          |                       |  |                                 |                  |  |
| 3          |                  |                          |                       |  |                                 |                  |  |
| 4          |                  |                          |                       |  |                                 |                  |  |
| 5          |                  |                          |                       |  |                                 |                  |  |
| 6          |                  |                          |                       |  |                                 |                  |  |
|            |                  |                          |                       | Course to be Added                     |                                 |                  |  |
|            | Institution      | Course                   | Number                | Course Title                           | Credits                         | Term<br>Enrolled |  |
| 1          |                  |                          |                       |  |                                 |                  |  |
| 2          |                  |                          |                       |  |                                 |                  |  |
| 3          |                  |                          |                       |  |                                 |                  |  |
| 4          |                  |                          |                       |  |                                 |                  |  |
| 5          |                  |                          |                       |  |                                 |                  |  |
| 6          |                  |                          |                       |  |                                 |                  |  |
| <u>вхр</u> | ianation: (dei   | ail reasons <sub>.</sub> | for course deleted    | and justification for choice of course | added)                          |                  |  |
| Stude      | ent signature (t | yped)                    |                       | Approved by:                           | Approved by:  Adviser Signature |                  |  |
|            |                  |                          |                       |  |                                 |                  |  |
| E-ma       | il Address       |                          |                       |  | Date                            |                  |  |
| Expe       | cted Graduatio   | on Date:                 |                       |  |                                 |                  |  |