



GRADUATE ADMISSIONS AND RECORDS
 UNIVERSITY CENTRE
 UNIVERSITY OF VICTORIA
 PO BOX 3025, STN CSC
 VICTORIA, BC V8W 3P2 CANADA

SPARR PROGRAM CHANGE FORM

Student's Name: _____ Student Number: _____

PROGRAM CHANGE:

Add Course: _____ Remove Course: _____ Unit Value: _____
 Add Course: _____ Remove Course: _____ Unit Value: _____
 Add Course: _____ Remove Course: _____ Unit Value: _____

Rationale: _____

Attach a program rationale statement from the supervisor indicating why a course change is being sought. Please indicate which course(s) the change will be replacing, if applicable. If the course(s) is an addition to the program, please indicate the revised unit value for the program.

REVISED PROGRAM: Please list all courses (complete or incomplete) that will be used in your program.

DEPT & COURSE NO.	COURSE TITLE	INSTITUTION (if not UVic)	UNIT VALUE
Required courses (i.e. MUST be completed in order to graduate)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Elective courses (i.e. optional depending on availability/interest).			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Maximum units in proposed program _____

Master's degrees must consist of a minimum of 15 units. Doctoral programs must consist of a minimum of 30 units for students who have a Master's degree, 45 units for students without a Master's degree.

COMMITTEE MEMBER CHANGE:

Name <i>(please print)</i>	Signature	Department	Date
Co-supervisor	_____	_____	_____
Co-supervisor	_____	_____	_____
Committee member	_____	_____	_____
Committee member	_____	_____	_____

Student's signature: _____ Date: _____
 Co-Supervisor's signature: _____ Date: _____
 Graduate Admissions and Records approval: _____ Date: _____
 SPARR Graduate Advisor approval: _____ Date: _____
 Faculty of Graduate Studies approval: _____ Date: _____