

Texas A&M International University

A Member of the Texas A&M University System

Graduate School

Post-Baccalaureate Request Form

Instructions: This form is to be completed to change the term of entry for the graduate application that was originally submitted and to request that the student be coded as post-baccalaureate for the purpose of taking prerequisites for admission into a graduate program. Please be advised that all prerequisites for admission must be taken within 12 months of being coded as post-baccalaureate. The change of entry will only be accepted if the original application is less than one year old and the graduate degree the student is seeking remains the same after completing the prerequisites. If the student wishes to apply for a different program, then the student must submit a new Graduate Admission Application at www.applytexas.org. **New Application Fee of \$35** will be required if this form is submitted after the 4th (Summer) or 12th (Fall/Spring) class day of the term on the original application submission.

Section 1: STUDENT INFORMATION

Student Name: _____ TAMIU ID: _____

Phone: _____ Email: _____

Term of which application was originally submitted: _____ (Example: Spring 2017)

Section 2: CHANGE OF ENTRY TERM

Change entry term to (indicate semester & year) _____ (Example: Fall 2017)

Degree: Masters of: Science Arts Major: _____

Section 3: POST-BACCALAUREATE CODING

State the reason(s) for the request of the post-baccalaureate coding: _____

List the courses the student is required to take as a prerequisite for admissions: _____

Department Chair, Advisory Committee Chair, or Program Director:

By providing a signature you are verifying that the student falls under the post-baccalaureate coding specifications, and hereby approve the processing of the above information.

Approval Signature: _____ Date: _____

Student:

I authorize the Office of Graduate Studies to make the changes noted above to my application for admission.

Student Signature: _____ Date: _____

Submit original approval form with signatures to:

Graduate School

Senator Judith Zaffirini Student Success Center 206 ~ Phone: 956.326.3020

Graduate School use ONLY:

Processed by: _____ Date: _____