

Computer Science

Change in Ph.D. Plan of Work

This form is to be used for minor changes. If requesting a major change, a new Ph.D. Plan of Work must be submitted.

Upon advisor approval, form should be emailed to CSGradAdvisor@wayne.edu.

Name:		Date:	_ Date:	
Banner ID: _		Email:		
Reason For	Change:			
Courses to be DI	ELETED:			
Course Number	Course Title		Credits	Semester
Courses to be Al	DDED:			
Course Number	Course Title		Credits	Semester
*This will ch	nange the total number	of credits from to	·	
Signatures	<u>5</u>			
Student ·				Date:
Graduate P	roaram Director:			Date: