

# Change of Degree Program

학위변경 신청서

1. Name 성명: (English) \_\_\_\_\_ (Korean) \_\_\_\_\_

2. Student ID#: \_\_\_\_\_ E-mail: \_\_\_\_\_@wmu.edu Date(날짜): \_\_\_\_\_

3. Current Degree Program: FCC BABS BACC BAM MACC MAM MAT M.DIV

4. Desired Program: Mark "✓" next to your desired program from the list below.

<input type="checkbox"/> BABS(Christian Ministry)	<input type="checkbox"/> BABS(Cross-Cultural Christian Education)
<input type="checkbox"/> BAM	<input type="checkbox"/> BACC
<input type="checkbox"/> MDIV	<input type="checkbox"/> MAT
<input type="checkbox"/> MACC	<input type="checkbox"/> MAM

5. Desired Program Start Date: Fall / Spring Semester(학기) 20 Year(년도)

6. Reason (사유): \_\_\_\_\_

7. Fee (신청비): \$100 ( ) \_\_\_\_\_

\*Student's Signature : \_\_\_\_\_

-----Office Use Only-----

Advisor

Registrar

Accountant

Student Dean

Academic Dean