



# WILLIAM & MARY

## Graduate Arts & Sciences

### Change Credit Hours Form

To change credit hours for multiple courses, use a separate form for each change.

International students should consult with a Reves Center advisor before submitting this form if changing credit hours will drop the number of registered hours below nine credits.

#### Instructions

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Signatures required before returning the form:

- Student;
- Course instructor
- Director of Graduate Studies or Chair/Program Director of the student's graduate program.

Note: The Director of Graduate Studies may attach comments or reasons for the changes requested; for any retroactive changes (i.e., changes after the end of the semester or for a previous semester), the DGS *must* attach an explanation, as well as grades when applicable.

For timely processing please ensure that this form is completed correctly and is received by all necessary stakeholders (program administrators must receive a copy for tracking purposes). Please confirm that the correct email address is entered for each recipient. If you are unsure of correct contact information for any recipient, feel free to reach out to your program for assistance.

Deadline: Form is due before the last day of classes.

Use your W&M email account when submitting forms to the OGS.



WILLIAM & MARY  
Graduate Arts & Sciences

OFFICE OF GRADUATE STUDIES  
Blow Memorial Hall (Suite 326), 262 Richmond Road  
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### Change Credit Hours

Student's Name: Mary Brown Banner ID #: 939999999

Dept./Program: American Studies Degree:  M.A.  M.S.  M.P.P.  Ph.D.

Year: 2024 Semester:  Fall  Spring  Summer

Course Title: Dissertation

Course CRN# 12345 Dept./Prog AMST No. 800 Section: 03

Credits Change From: 3 Credits Change To: 9

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor Signature \_\_\_\_\_ Date \_\_\_\_\_

Director of Graduate Studies or Chair/Program Director: Print Name | Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>OGS:</b>	Student full-time after proposed add/drop/withdraw? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Assistant Dean for Graduate Studies Signature	_____ Date
	<b>Distribution:</b> <input type="checkbox"/> Reves (if applicable)	_____ Graduate Registrar	