Change From Provisional to Regular Status for Graduate Degree Candidates

Michigan State University

College Of Education

☐ PhD	☐ EdS	☐ EdD	☐ MA/MS	Date:			
Name:			PI	D:			
Program Code:			Program Name:				
Provisional status conditions:							
Change s	status to "R	Regular," ef	fective:				
S	emester/Ye	ear:					
Advisor's	s Signature:	:			D	ate:	
		Name:					

Program Secretary: Please send form to the Graduate Records Office, 205 Erickson Hall or via email to edacadaf@msu.edu