

**COLLEGE OF FINE ARTS
REQUEST FOR DEGREE PLAN**

PLEASE DO NOT APPLY FOR A DEGREE PLAN UNTIL YOU HAVE ENROLLED FOR YOUR 54TH HOUR.

When the requested Degree Plan has been drafted, a copy will be mailed to you; a copy will be retained by your major department, and the original will be on file in the office of the Dean.

Is this the first time you have requested a degree plan? () Yes () No TCU ID# _____

Last Name _____ First _____ Middle _____ Maiden _____

TCU Mailing Address _____
TCU Box or Street Address _____ City _____ State _____ Zip _____

Local Phone _____ Email _____

Home Address _____
Street _____ City _____ State _____ Zip _____

CATALOG REQUIREMENTS ARE THE FOLLOWING _____ Date Entered TCU _____
Year _____

Degree Program Desired: () B.A. () B.F.A. () B.M. () B.M.E. () B.S.

Have you attended other college(s)? () Yes () No If yes, list the name(s) below:

Name(s) of College(s) _____

NOTE: Be sure all transfer work has been sent to the Registrar's Office , TCU Box 297004

Major _____ COMPLETE IF YOU ARE SEEKING
CERTIFICATION:
All-level () Secondary ()
Minor _____ Secondary Teaching Field _____

MUSIC MAJORS – Performance area _____

SIGNATURE _____ Date of Request _____

SPACE BELOW TO BE COMPLETED BY DEAN'S OFFICE

Date Application Received _____

TRANSCRIPT: Attached () Date Requested _____ Date Received _____

EVALUATION: Attached () Date Requested _____ Date Received _____

Copies sent to: Student
Department
School of Education
Athletic Department