

The University of Texas at Austin
Department of Mechanical Engineering
Change of Area Application

This application is to be used by persons who are currently enrolled in the Mechanical Engineering program who wish to change their area of study.

Application submitted on: _____

Name _____ UT EID _____

Phone _____ Email _____ Office _____

Residency _____ Country _____

Current: Area of Specialization _____

Proposed: Area of Specialization _____

Academic Supervisor (signature) _____

Please list more specific areas of study and research in which you are interested:

Area Coordinator (print)

Signature

Accept/Deny

Date

Graduate Adviser Signature