**Program of Doctoral Coursework – change request**

Please complete the form by typing in the gray fields (which will extend automatically while typing).

Handwriting will not be accepted.

The student's name: Click here to enter text. ID/student number: Click here to enter text.

Please approve the **addition** of the following course(s):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number of semesters | Bachelor or Master level course  | Number of credit points | Teacher's name | Course name | Course number (as per HUJI course catalogue) |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |

Please approve the **cancellation** of the following course(s) that was previously approved:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number of semesters | Bachelor or Master level course | Number of credit points | Teacher's name | Course name | Course number (as per HUJI course catalogue) |
|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  |   |  |  |  |  |

Reasons for the request:Click here to enter text.

Below is the entire course program, **in its new proposed format:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number of semesters | Bachelor or Master level course | Number of credit points | Teacher's name | Course name | Course number (as per HUJI course catalogue) |
|  |   |  |  |  |  |
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|  |   |  |  |  |  |

Date: Click here to enter a date.

**The request must be approved and signed by the supervisor(s) and the Advisory Committee members.**

Name of advisor: Click here to enter text. Signature: 

Name of advisor: Click here to enter text. Signature: 

Name of advisor: Click here to enter text. Signature: 

Name of Advisory Committee member: Click here to enter text.

signature: 

Name of Advisory Committee member: Click here to enter text.

signature: 

Name of Advisory Committee member: Click here to enter text.

signature: 