



## Degrees and Abbreviations

MAR	Master of Architecture
MA	Master of Arts
MBA	Master of Business Administration
MED	Master of Education
MFA	Master of Fine Arts
MLIS	Master of Library and Information Science
MM	Master of Music
MPA	Master in Professional Accounting
MPAF	Master of Public Affairs
MSAPPLPHY	Master of Applied Physics
MSARCHST	Master of Science in Architectural Studies
MSCRP	Master of Science in Community and Regional Planning
MSCAM	Master of Science in Computational and Applied Mathematics
MSCS	Master of Science in Computer Sciences
MSE	Master of Science in Engineering
MSECON	Master of Science in Economics
MSN	Master of Science in Nursing
MSPHR	Master of Science in Pharmacy
MSST	Master of Science in Statistics
MSSTC	Master of Science in Science and Technology Commercialization
MSSW	Master of Science in Social Work
EDD	Doctor of Education
DMA	Doctor of Musical Arts
PHD	Doctor of Philosophy

## State Abbreviations

AL	Alabama	NM	New Mexico
AK	Alaska	NY	New York
AZ	Arizona	NC	North Carolina
AR	Arkansas	ND	North Dakota
CA	California	OH	Ohio
CO	Colorado	OK	Oklahoma
CT	Connecticut	OR	Oregon
DE	Delaware	PA	Pennsylvania
DC	District of Columbia	RI	Rhode Island
FL	Florida	SC	South Carolina
GA	Georgia	SD	South Dakota
HI	Hawaii	TN	Tennessee
ID	Idaho	TX	Texas
IL	Illinois	UT	Utah
IN	Indiana	VT	Vermont
IA	Iowa	VA	Virginia
KS	Kansas	WA	Washington
KY	Kentucky	WV	West Virginia
LA	Louisiana	WI	Wisconsin
ME	Maine	WY	Wyoming
MD	Maryland	AA	Armed Forces the Americas
MA	Massachusetts	AE	Armed Forces Europe
MI	Michigan	AP	Armed Forces Pacific
MN	Minnesota	AS	American Samoa
MS	Mississippi	FM	Federated States of Micronesia
MO	Missouri	GU	Guam
MT	Montana	MH	Marshall Islands
NE	Nebraska	MP	Northern Mariana Islands
NV	Nevada	PR	Puerto Rico
NH	New Hampshire	PW	Palau
NJ	New Jersey	VI	U.S. Virgin Islands



The University of Texas at Austin  
Transcript Request Form for Change of Graduate Major

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In accordance with the Texas Open Records Act and the Family Educational Rights and Privacy Act of 1974, as amended, student academic records are classified as confidential and may be released only with the STUDENT'S written authorization and signature.

This request must be accompanied by a check or money order, payable to The University of Texas at Austin in the amount of \$10.00. Please submit this request to the **Office of the Registrar, The University of Texas at Austin, Austin, Texas 78712-1157.**

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Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Other names used during attendance at UT Austin: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ UT EID: \_\_\_\_\_

Current Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

First Semester Attended UT: \_\_\_\_\_ Last Semester Attended UT: \_\_\_\_\_

List all colleges attended other than UT Austin:

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I understand that copies of my official academic record will be released to the Graduate and International Admissions Center

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I certify that I am the person whose name appears on this form, and do hereby authorize release of my academic records to the Graduate and International Admissions Center.

Signed \_\_\_\_\_ Date: \_\_\_\_\_





# THE UNIVERSITY OF TEXAS AT AUSTIN Request for Reference

This form is important in the evaluation of the applicant for admission and can be used in support of application for a financial award (graduate fellowships and assistantships).

Under the provisions of the Family Educational Rights and Privacy Act of 1974, this applicant (if admitted and enrolled) will have access to the information provided below unless he/she has waived such access.

PLEASE FILL IN THIS FORM COMPLETELY BY TYPING OR USING A MEDIUM POINT, BLACK INK PEN.

### Applicant completes the top section of this form.

APPLICANT INFORMATION:

\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 Last Name First Name Middle Name Month Day Year

UT EID: \_\_\_\_\_ PROPOSED GRADUATE MAJOR: \_\_\_\_\_  
 Name of proposed graduate major (see p. 1 for official names of programs offered) Graduate major code (see p. 1) Specific area of interest or specialty

OPTIONAL: I hereby waive my right of access to the material recorded below.

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

### Respondent completes the bottom section of this form.

To the Respondent: On a separate sheet of paper, please describe your judgement of this applicant's qualifications and promise, the applicant's intellectual ability, the applicant's motivation and capacity for research or for acquiring professional skill, the applicant's promise for a career in productive scholarship and effective teaching, and the quality of the applicant's previous work and of his or her character or personality. Please also check, for comparative assessment, the boxes below. **Your written assessment is very important to the admission committee.**

I WOULD COMPARE THE APPLICANT WITH OTHER STUDENTS OF THE SAME LEVEL AS FOLLOWS:

	EXCEPTIONAL	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO INFORMATION
Intellectual Ability					
Writing Ability					
Speaking Ability					
Academic Preparation					
Motivation					
Maturity					
Teaching Ability					

I have known this applicant for \_\_\_\_\_ years.

During this time, the applicant was a/an:  undergraduate student  graduate student  assistant of mine  advisee of mine  departmental assistant  other (please specify) \_\_\_\_\_

In summary, my recommendation for this applicant is:  very strong  strong  average  below average  recommendation with reservation (please explain below)

\_\_\_\_\_

RESPONDENT INFORMATION (Please type or print):

\_\_\_\_\_  
 Name Place of Employment Title

\_\_\_\_\_  
 Address City, State, Zip Code (Area Code) Telephone

\_\_\_\_\_  
 Signature Date E-Mail Address

### Unless otherwise instructed by the graduate program, please mail this form to:

The University of Texas at Austin  
Graduate Adviser  
Graduate Program in \_\_\_\_\_ (write in the name of the program to which applicant is applying)  
Austin, Texas 78712



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 Last Name                                      First Name                                      Middle Name

\_\_\_\_\_  
 DATE OF BIRTH:                                      \_\_\_\_\_  
 Month                                      Day                                      Year

UT EID:                                      PROPOSED GRADUATE MAJOR:

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 other (please specify) \_\_\_\_\_

In summary, my recommendation for this applicant is:  very strong     strong     average     below average     recommendation with reservation (please explain below)  
 \_\_\_\_\_

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\_\_\_\_\_  
 Name                                      Place of Employment                                      Title

\_\_\_\_\_  
 Address                                      City, State, Zip Code                                      (Area Code) Telephone

\_\_\_\_\_  
 Signature                                      Date                                      E-Mail Address

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