

# CALIFORNIA INSTITUTE OF TECHNOLOGY

DIVISION OF ENGINEERING AND APPLIED SCIENCE

Mail Code 104-44

Pasadena, California 91125

**TO:** ME Option Representative

**FROM:**

**DATE:**

**SUBJECT:** Petition for Change of Requirements for PhD

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**Nature of Request:**

☐ Recommend      ☐ Do Not Recommend

\_\_\_\_\_  
Advisor's signature      Date: \_\_\_\_\_

☐ Approve      ☐ Do Not Approve

\_\_\_\_\_  
Option Representative's signature      Date: \_\_\_\_\_

Please return to the Option Manager (234 GT) when accepted and signed by advisor. A copy will then remain in your file and another copy will be forwarded to the Registrar's office.