



TUSKEGEE UNIVERSITY

## The Graduate School

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### Change of Conditional to Regular Status

Student Name:		TUID #
Major:	Concentration:	
Local Address	Permanent Address:	
Phone number:		
Enrollment date:	Email:	

To: The Dean of Graduate School:

We certify that this graduate student has met all requirements to transfer from conditional to regular status.

List the condition(s) the student met to transfer to regular status.

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