

# MASTER'S DEGREE PROGRAM OF STUDY

(complete in five copies)

In consultation with the adviser, the student should initiate this application, secure the approvals indicated below and present it to the DEAN or GRADUATE OFFICER for processing prior to completion of 15 hours applicable to the degree program.

NAME (PRINTED) \_\_\_\_\_ STUDENT ID NUMBER \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_ DEGREE SOUGHT \_\_\_\_\_

CITY, STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ DEGREE PROGRAM AND EMPHASIS AREA \_\_\_\_\_

Colleges and universities attended and degrees received (give dates): \_\_\_\_\_

List below courses proposed for your advanced degree program. (Over and above the undergraduate prerequisites for graduate work in the special field, the student must present at least 30 hours selected from courses receiving graduate credit. At least 60% of the total number of hours applicable to the degree program must be at the 500 level.)

NUMBER	TITLE	HOURS	GRADE	NUMBER	TITLE	HOURS	GRADE
					500 LEVEL		
					TOTAL		

REQUIREMENTS	APPROVALS										
IS QUALIFYING EXAMINATION REQUIRED? _____	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">ADVISER _____</td> <td style="width: 20%;">DATE _____</td> </tr> <tr> <td>CHAIRPERSON _____</td> <td>DATE _____</td> </tr> <tr> <td> </td> <td>DATE _____</td> </tr> <tr> <td> </td> <td>DATE _____</td> </tr> <tr> <td>DEPT. CHAIRPERSON _____</td> <td>DATE _____</td> </tr> </table>	ADVISER _____	DATE _____	CHAIRPERSON _____	DATE _____		DATE _____		DATE _____	DEPT. CHAIRPERSON _____	DATE _____
ADVISER _____		DATE _____									
CHAIRPERSON _____		DATE _____									
		DATE _____									
		DATE _____									
DEPT. CHAIRPERSON _____	DATE _____										
IS FOREIGN LANGUAGE PROFICIENCY REQUIRED?* _____											
*IF YES, SPECIFY LANGUAGE: _____											
IS FINAL EXAMINATION REQUIRED? _____											
IS THESIS REQUIRED? _____											
IS FINAL THESIS EXAMINATION REQUIRED? _____											
SPECIAL REQUIREMENTS											
STUDENT SIGNATURE _____ DATE _____	DEAN OR GRADUATE OFFICER _____ DATE _____ (as required by unit)										