

OFFICE OF GRADUATE STUDIES & RESEARCH Program of Study and Advancement to Candidacy For Master's or Specialist Degree Programs

Name _		ster's or speen		Č			
Address _	Ctata		— ID :				
City _	State Zip Code			gree: ncentration:			
Major _							
To be com Seek uncon prerequisit Remove a Type or pr	the Admission to Candidacy/Prograpleted when student has complete nditional admission into your degrees courses, etc); ny Incomplete ("I") grades from the rint information on form, and submiree (3) copies of the form to the Grand States of	d between 9 to e program of cho e permanent record to advisor for si	15 semeste ice, clearing rd;	r hours;		.e., test so	cores,
	Required Courses				Prereq. Courses Required		
Course ID	Course Title_	Semester Hrs.	<u>Grade</u>	Semester Completed	Course ID	Sem. Hrs.	Sem. Comp
	Concenti	ration					
Course ID	Course Title	Semester Hrs.	<u>Grade</u>	Semester Completed	Courses Taken in Non- Degree Status (9 hrs. max.)		
					Course ID	Sem Hrs.	Sem. Comp
	<u>Electives</u> <u>Comester</u> <u>Comester</u>				Test Scores		
Course ID	<u>Course Title</u>	Semester Hrs.	<u>Grade</u>	Semester Completed	Date Taken: GRE: V	Q	
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					MAT: GMAT: FE:		
Total Number	of hours required for degree:				IL.		
	r credit must be approved before	it can be shown	on the pro	gram of study - us	se Transfer of Cred	lit Form.	
Student's Sig							Date
	Recommended by:		Dean of	College/School			Date
Advisor Date Dept. Head		 Date		Ар	proved by:		
-cpt. ricau		Date	Dean of	Graduate School			Date