

This form is designed to initiate entrance into the BS/MS program and to identify courses to be taken by the undergraduate student. It is to be completed by the Undergraduate Advisor and Graduate Program Director and must be returned to the Office of Graduate Studies, Fenster Hall, Suite 140 for processing.

Note: This does not constitute acceptance to the Master's program.

Name _____		Date _____	
Current Semester:	<input type="checkbox"/> Fall 20 ____	<input type="checkbox"/> Spring 20 ____	<input type="checkbox"/> Summer 20 ____
ID# _____	E-mail _____		
MS Degree Program: _____			
Undergraduate Major: _____		Credits Earned: _____	
Current Cumulative GPA: _____		Cohort: <input type="checkbox"/> Junior <input type="checkbox"/> Senior	
Expected BS Date of Completion: <input type="checkbox"/> August 20____ <input type="checkbox"/> January 20____ <input type="checkbox"/> May 20 ____			

FOR UNDERGRADUATE ADVISOR TO COMPLETE

Please indicate two graduate courses to be taken to complete the undergraduate degree that are also appropriate for the future graduate degree.

(1) _____ in place of _____

(2) _____ in place of _____

Undergraduate Advisor's Name (please print) _____

Undergraduate Advisor's Signature _____ Date _____

Telephone # _____ E-mail _____

Remarks _____

FOR GRADUATE PROGRAM DIRECTOR TO COMPLETE

Please indicate by signing if you concur with the two graduate courses for a future graduate degree program and if the student is accepted into the BS/MS program: **Accepted** **Not Accepted**

GRE required for MS applicant: Yes (Recommended **before** BS graduation) No

Graduate Program Director's Name (please print) _____

Graduate Program Director's Signature _____ Date _____

Remarks _____

FOR GRADUATE STUDIES OFFICE USE ONLY

Graduate Studies:	_____	_____	_____
	Name	Signature	Date
BS Completion:	_____	Final Cumulative GPA: _____	
	Month / Year		
Master's Program:	_____	Academic Status: _____	