

BS/MS DEGREE PROGRAM - Department Pre-approval

Please complete this form and return it to the department office for approval before making online application to Graduate School.

Name: _____Student ID#:_____

Mailing Address:			
Phone:	Email A	ddress:	
Semester applying for: FallSpring			
Financial Aid:	Required	Requested	
Research Interest Area:			
For Department Use Only:			
Minimum Required – 122 credit hours; 3.0 cum gpa			
Current credit hours:		semester recorded	
Current Cumulative G	PA:	semester recorded	
Approved by Dept Chair or Graduate Advisor, Name:			
Signature:		Date:	