PROPOSAL FOR A PROGRAM LEADING TO A MASTER'S DEGREE WITH A DOUBLE MAJOR

Student's Name _____ **ID#** _____

Current Major _____ **Admitted** _____
(term/year)

The degree program (department) listed first below must already be authorized to grant the degree title desired. For example, if the degree desired is to carry the title of M.A., then the program listed first must be authorized to grant the M.A.

Name of Degree _____

_____ _____
(Current Major) **(Additional Major)**

First Major Department Courses			Second Major Department Courses		
Dept.	**Number**	**Sem. Hrs.**	**Dept.**	**Number**	**Sem. Hrs.**
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Total Semester Hours _____			**Total Semester Hours** _____		

_____
(Thesis/Research Paper Title or Subject)

Approved:

_____ _____
(Graduate Advisor/Dept.) **(date)** **(Graduate Advisor/Dept.)** **(date)**

_____ _____
(Dept. Chairman/Dept.) **(date)** **(Dept. Chairman/Dept.)** **(date)**

_____
(Dean of the Graduate School) (date)