Accelerated MS Advising Plan

Instructions: This form is to be filled out at the time of application to an accelerated MS program. Discuss your plans with your undergraduate advisor and the graduate program coordinator. This form must be on file before your application can be reviewed by the department.

Name of Student: _____Student ID: _____

Proposed M.S. Program _____ Anticipated BS graduation (month/year): _____

Anticipated option: ____ non-thesis option   ____ thesis option   ____ undecided

The courses on this form comprise a preliminary list to help ensure that the proposed courses meet the MS program requirements. The final list of courses must be approved by your graduate advisor or committee after you complete the BS. Please note these Graduate Education policies regarding graduate credits.

- A maximum of twelve credits may be double-counted, although some programs allow fewer.
- A maximum of 9 credits of the degree can be 400-level courses. No credits lower than 400-level are allowed.
- The number of double-counted credits and transfer credits cannot exceed 12. Transfer credits cannot be double-counted and must be approved by your graduate advisor.
- Consult the academic catalog and/or your program coordinator/department head about additional restrictions of your specific degree program.
- Contact the Financial Aid Office (if applicable) about possible impacts of the accelerated MS on your financial aid eligibility.

I plan to use these courses taken for my BS and double-count them in the accelerated MS.

_____   _____
Course code   Course name   #credits   Course code   Course name   # credits

_____   _____
Course code   Course name   #credits   Course code   Course name   # credits

I plan to transfer these courses from another institution and use them for my graduate degree only.

_____   _____
Course code   Course name   #credits   Course code   Course name   # credits

_____   _____
Course code   Course name   #credits   Course code   Course name   # credits

Student signature: _____ Date: _____

_____   _____   _____
Undergraduate Advisor   (Print name & Dept)   Date

_____   _____   _____
Graduate Advisor/Major Professor Signature   (Print name & Dept)   Date

_____   _____   _____
Dept. Head or Grad Program Coordinator Signature (Print name & Dept)   Date