



Graduate Degree Plan Acknowledgement and Responsibility Form

Initial Degree Plan Revised Degree Plan

INSTRUCTIONS: THIS FORM SHOULD BE FILED EACH TIME ONE OF THE BELOW CRITERIA IS MET.

1. Before the student completes 12 semester hours of graduate credit, this form should be initially filed to indicate the student’s major field of study.
2. Committee members should be appointed before a student completes 12 semester hours of graduate credit.
3. Please check the admissions candidacy box when the student has received full admission to the department program.
4. Please check the “Initial Degree Plan” box when this form is filed for the first time. Subsequent filings of the form should have the “Revised Degree Plan” box checked.

Date: _____

Student Name: _____ Student ID#: _____

Degree Type: _____ Major: _____ Catalog Year: _____

Minor (if any): _____ Concentration (if any): _____

***The above named student is recommended for full admission/admission to candidacy to the above named program.**

The signatures below certify that the above named student agrees to fulfill the requirements to complete a master’s degree utilizing the appropriate catalog year and has received a printed copy of the degree audit. In order to be eligible for graduation, the student understands it is his/her responsibility to fulfill the requirements listed in the audit. Other requirements stipulated in the catalog, by the major department, and the Office of Graduate Studies must be satisfied.

Student Signature

College Dean

Academic Advisor

Committee Member

Please Return to: Office of Graduate Studies:

Processed by/Date: _____