

**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)