

PROPOSED MASTERS & SPECIALIST DEGREE PROGRAM
PART 1 OF 2 PARTS

- NOTE: Work taken before matriculation may not be used in a graduate program without departmental and Graduate College approvals. Transfer work taken after matriculation may not be used without prior permission from the department and Graduate College.
- Please type directly into the highlighted fields or print clearly in blue or black ink.
- Please see your department for Part 2 of the Masters & Specialist Degree Program
- For Part 2, please include ALL courses you completed, are currently in, and propose to take in the future in order to complete your degree.

STUDENT INFORMATION

Student ID (L-Number): _____

Student Name: _____
Last Name First Name M.I.

Address: _____
Street Address

City State ZIP Code

UNLV E-mail Address: _____ Phone: _____

ADVANCED DEGREE PROGRAM INFORMATION

Graduate Catalog year used to determine degree requirements: _____

Department: _____ Concentration: _____

Degree Sought: _____

Degree Options: Thesis Professional/Scholarly Paper or Project Other: _____

APPROVAL SIGNATURES

(Please sign only after reading and endorsing Part 2 of the PROPOSED MASTERS & SPECIALIST DEGREE PROGRAM)

Student Date

Department Chair/Graduate Coordinator Date

Advisory Committee Chair Date

*Dean, Academic College Date

GRADUATE COLLEGE USE ONLY

Dean, Graduate College Date

* Please consult the Forms page of the Graduate College website (graduatecollege.unlv.edu) to determine if this signature is required for your program.