



## 4+1 Program Application Form

The purpose of this form is to demonstrate how the student will complete requirements for the undergraduate degree through a combination of undergraduate courses already completed, undergraduate courses to be taken or in progress, and graduate courses to be applied to the undergraduate degree.

**Student Name:** \_\_\_\_\_ **ID:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### BACHELOR'S PROGRAM

**School:** \_\_\_\_\_ **Degree:** \_\_\_\_\_

**Major:** \_\_\_\_\_ **Total hours completed to date:** \_\_\_\_\_ **Undergraduate CUM GPA:** \_\_\_\_\_

### UNDERGRADUATE COURSES TO BE COMPLETED

Please Attach a Degree Audit

Total Credit Hours in Progress: \_\_\_\_\_

### MASTER'S PROGRAM

**School:** \_\_\_\_\_ **Degree:** \_\_\_\_\_

**Major:** \_\_\_\_\_ **FIRST TERM OF GRADUATE COURSE ENROLLMENT:** \_\_\_\_\_ **I have applied/will apply for admission to this graduate program:**

Yes       No

### GRADUATE COURSES WHICH WILL BE ACCEPTED FOR THE UNDERGRADUATE DEGREE

Dept.	Course Number	Course Title	Undergraduate Requirement Fulfilled	Credit Hours
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total Credit Hours (Not to exceed 12 Credit Hours): \_\_\_\_\_

**Your signature on this form indicates that you understand registration will create a financial obligation to the College. Tuition and fees will be billed at the undergraduate tuition rate according to the published Tuition and Fees Schedule.**

\_\_\_\_\_  
(Student's Signature) \_\_\_\_\_ (Date)

### APPROVALS

Academic Advisor's signature \_\_\_\_\_ (Date)

Dean's signature \_\_\_\_\_ (Date)

Processed by Registrar's Office \_\_\_\_\_ (Date)