

Master's Degree or Certificate Program of Study

*This form should be filled out on your computer, then saved with a new file name to your local disk.
Next, print the form and obtain the necessary signatures.*

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|------------|--------|-------------|-------|--------|---------|
| Last Name: | | First Name: | | MI: | USC ID: |
| Street: | | | City: | State: | Zip: |
| Email: | | | | Phone: | |
| Degree: | Major: | | | Track: | |

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|----------------------------|-------------|-------------|------------------------------------|-----------------------|
| Admitted to Program | Term | Year | Foreign Languages required: | Date Completed |
| | | | | |

Other Requirements:

Program of Courses

In the spaces provided below, list all courses for which approval is requested in the master's degree (including thesis, if required) or certificate program. Example: ENGL 751 Amer. Novel in 20th Cent. Do not list courses not specifically required for the master's or certificate program. Note that any course on this program which exceeds the 6 year limit (before the degree is awarded) must be revalidated or replaced with another course.

| Dept Prefix | Course Number | Abbreviated Course Title | Term Completed | Year | Credit Hours | Grade | Where Taken |
|-------------|---------------|--------------------------|----------------|------|--------------|-------|-------------|
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Approval Signatures

Student Date

Graduate Director of Program or School Date

Major Professor Date

Dean of the Graduate School Date

