

**PURDUE UNIVERSITY
GRADUATE SCHOOL**

Request for Master's Degree Advisory Committee and Plan of Study Approval
(Please read instructions on reverse side.)

Pg. _____ of _____ Pgs.

Date Degree Expected _____

1. NAME OF STUDENT _____ PUID No. _____

2. DEPARTMENT _____ Dept. Code _____ Thesis Option Nonthesis Option

Degree Title _____ Degree Code _____ Research Area _____

3. AREA OF SPECIALIZATION (if any) _____ AOS Code _____

Area	4. COURSES				5. METHOD OF ESTABLISHING CREDIT			6. DATE COMPLETED OR TO BE COMPLETED
	OFFICIAL TITLE ABBREVIATION <i>Please group courses into "Primary" (P) & "Related" (R) areas.</i>	Subject Abbr.	Course No.*	Cr. Hours	Regular Regis.	Non-degree Regis.	Other or Transfer From +	

7. LANGUAGE REQUIREMENTS	Method to be used to meet language requirements	+ Transfer course must be described as on original transcript. * Mark course number with asterisk (*) if B or better is required.
a.	a.	
b.	b.	

8. NAMES OF ADVISORY COMMITTEE MEMBERS (Please type full name.)	9. GRADUATE FACULTY IDENTIFIER	APPROVED BY ADVISORY COMMITTEE MEMBERS (Signature)	10. DEPARTMENT		11. ADVISOR IN AREA OF:
			Abbr.	Code	
Chair		Chair			

<input type="checkbox"/> Check here if supplemental notes or other requirements are attached.	13. APPROVED BY:	
	Head of the Graduate Program	Date

12. SIGNATURE OF STUDENT _____	Date _____	Academic Dean (if required) _____	Date _____	Graduate School Dean
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