UNIVERSITY OF NEW ORLEANS

Graduate School

Application for Candidacy – Master's Degree

Submit original and one copy

Name		Student ID	
SSN		Anticipated Graduation Date	
Program		Sem/Yr Plan of Study Began	
Degree			

List only those courses that are needed to fulfill your program degree requirements and will be completed within the required time limit.

Graduate Courses					Graduate Courses				
Prefix	Course #	Hours	Sem/Yr	Grade	Prefix	Course #	Hours	Sem/Yr	Grade

Special Conditions (if applicable)	

Date Language Completed	Language Satisfied By	Thesis Option	Non-Thesis Option

Thesis Committee			
Major Professor		Committee Member	
Committee Member		Committee Member	

I understand that I must complete the plan listed above in order to fulfill the requirements for my graduate degree. Any changes to the above plan must be approved in writing by the major program and the Graduate School.

Signature of Applicant Date

Major Professor Date

Graduate Coordinator Date

Department Chair Date

Graduate School Approval		
Dean of the Graduate School		
	Robert C. Cashner	Date