



UO ID _____ Last Name _____ First Name _____

UO Email _____ Concurrent Degree Type: Master's/Master's Doctoral/Master's

You must apply for graduation and submit this completed Program Plan to the Graduate School no later than Friday of Week 2 in the term of graduation (for either or both degrees).

Major 1 _____ Degree 1 (MA, MS, MEd, etc) _____

Major 2 _____ Degree 2 (MA, MS, MEd, etc.) _____

Table with 4 columns: Term, Course #, Course Title, Credits. Includes an example row with AAAP 510 and Research Methods.

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Major 1 Department Rep Name: _____

Major 2 Department Rep Name: _____

Department Representative Signature _____ Date _____

Department Representative Signature _____ Date _____

Graduate School Approval _____ Date _____