

Master's Accelerated Program Referral Form

Student Name:	Aggie ID Number:	Email:
Undergraduate College:	Anticipated Graduate Major:	
Dual Degree:	Graduate Only:	

Important information

This completed form must be submitted to the Graduate School by the FIRST FRIDAY OF CLASS for the semester in which the student will enroll in the requested course. Undergraduate students interested in the Master's Accelerated Program should consult with their anticipated Master's program department head. **This program is only applicable if the student has not completed a bachelor's degree. It is the student's responsibility to meet with their financial aid advisor as financial aid awards may be adjusted by the Financial Aid Office.**

Registration

The students are responsible for registering themselves in the course via the web or in their undergraduate college. Obtain the appropriate signatures if the course is not open or requires instructor approval.

1. Students accepted into the accelerated master's program must participate in the Developing New Scholars Program (DNSP), offered by the Graduate School. The purpose of DNSP is to create access for success in graduate education by providing formal mentoring.
2. Before submitting the MAP form to the Graduate School, the following signatures must be obtained: the anticipated Master's Department Head, Undergraduate Department Head, Financial Aid Advisor, and Undergraduate Academic Dean.
3. Graduate School will confirm the student's classification, Cumulative undergraduate GPA and Cumulative hours Earned. The student is required to have a cumulative GPA of 3.0 and will be classified as a junior when they begin the Masters Accelerated Program.
4. Upon the awarding of the Bachelor's degree and the student receives admissions into the master's program; the following approved 12 graduate credit hours will be assigned a graduate level to be applied towards Masters-level studies.

Term	CRN	Subject	Number	Credits	Final Grade	Graduate Advisor Approval

Required Approvals:

_____	_____	_____
Print Student Name	Student Signature	Date
_____	_____	_____
Print Anticipated Master's Dept. Head Name	Anticipated Master's Dept. Head Signature	Date
_____	_____	_____
Print Undergraduate Department Head	Undergraduate Department Head Signature	Date
_____	_____	_____
Print Financial Aid Advisor Name	Financial Aid Advisor Signature	Date
_____	_____	_____
Print Undergraduate Academic Dean Name	Undergraduate Academic Dean Signature	Date

SUBMIT TO GRADUATE SCHOOL REVIEW

CLASSIFICATION	CUM GPA	CUM HOURS EARNED	GRADUATE SCHOOL APPROVAL