

ACCELERATED MASTER'S PLATFORM PLAN OF STUDY

Last Name (Family)	First Name	Middle Init.	(Former)
Phone #	ID#	E-mail Address	
Undergraduate Degree/Major	Expected Completion (Term/Year)		
Graduate Degree/Major	Projected Start of Graduate Program (Term/Year)		
Name of Future Major Professor	AMP Start (Term/Year)		

Term	AMP Courses (Graduate courses to be taken while in undergrad program)	Course		Credits
		Dept.	No.	
Total				

Signatures

Student			
	<i>Typed Name</i>	<i>Signature</i>	<i>Date</i>
Undergraduate Advisor (Needed if undergraduate major not the same as graduate major)			
	<i>Typed Name</i>	<i>Signature</i>	<i>Date</i>
Major Professor (thesis) or Graduate/AMP Advisor (non-thesis)			
	<i>Typed Name</i>	<i>Signature</i>	<i>Date</i>