

**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>