

Student Personal Information

Dual Enrollment Request Form

Dual Degrees are two degrees that are earned simultaneously when a student is accepted by both department/programs and is approved by the appropriate academic deans and the Dean of the Graduate School. A student must be admitted to one academic program initially, and after the first semester, may apply and be accepted to the second-degree program. There is no formal relationship, overlap of credit hours, or sharing of credit hours between the two degree program requirements in a dual degree situation.*This form needs to be submitted at the correct time to ensure timely and effective advisement, prior to the graduate student completing 12 credit hours in the second degree program and before the student has reached the final semester and applied for graduation so there are no delays in graduation clearance.

First Name Last Name Empl ID# **Current Degree** Degree Level (i.e., Master's, Specialist, Doctorate, Professional) Degree Program Name CIP Code (*To be filled out by Department) Major Name Degree to be Added Degree Level (i.e., Master's, Specialist, Doctorate, Professional) Degree Program Name CIP Code (*To be filled out by Department) Major Name Required Justification and Materials for Dual Enrollment The student must provide a justification and a rationale for the dual enrollment request. Please attach additional pages, if need be. Has the dual enrollment request form been submitted prior to the completion of 12 credit hours in the second degree program? Yes No Are the following materials attached to this form: \Box Yes \Box No 1. A copy of the student's transcript 2. A program of study from both programs showing the requirements needing to be met 3. A timeline for completion Student Signature Date **Current Program Approval:** (Print name and sign) Major Professor/Advisor (if applicable): ______ Department Chair/Unit Head: Date: Academic Dean: Date: **Second Program Approval:** (Print name and sign) Major Professor/Advisor (if applicable): **Department Chair/Unit Head:** _____ Date: **Academic Dean:** Dean of the Graduate School: Date: