



I intend to graduate in the \_\_\_\_\_ semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the *Graduate College Bulletin*.

No  Yes *I am also enrolled as a doctoral student, and I wish to receive the non-thesis master's degree on the basis of my doctoral general examination, which I will take in the \_\_\_\_\_ semester.*



\_\_\_\_\_  
Student Signature Date

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**I have reviewed the above-named student's proposed program of study and I recommend approval.**

\_\_\_\_\_  
Printed Name of Graduate Liaison Graduate Liaison Signature Date

**FOR GRADUATE COLLEGE USE ONLY:**

Program effective **Fall 2015**. Semester Admitted/Re-admitted: \_\_\_\_\_

Date Checked: \_\_\_\_/\_\_\_\_/\_\_\_\_ | Timeline Begins: \_\_\_\_\_ | Hours Required: \_\_\_\_\_ | **OK** \_\_\_\_ **Problem** \_\_\_\_