APPLICATION FOR COMPLETION OF MASTER'S DEGREE

Office of Graduate Studies
Southern Oregon University • Ashland, Oregon 97520

Date._____

Soc. Sec No._____

Name _____

Mailing Address _____

_____

_____

City State Zip Code

Please give address where you would like us to mail our response to your application.

Current Phone_____

Master's Degree applied for: ☐ MS ☐ MA*
* You must meet the foreign language requirements as outlined in the Graduate section of SOU catalog.

CHECK ONE

☐ Elementary Education ☐ Secondary Education

☐ School Area _____
Name of School Area

☐ Interdisciplinary Studies ☐ General Studies
Indicate major area(s) for above programs:
_____

☐ Environmental Education

☐ MBA ☐ MSBA

List below classes you will register for during the quarter you plan to complete your degree. These courses should complete your planned master's degree program. Any deviation from that planned program must be supported by an approved program change. Forms are available in the Graduate Studies Office. If you are seeking teacher certification along with your master's degree, these program changes must be approved by the Director of Teacher Certification. The Graduate Studies Office should be notified immediately of any changes you plan to make on your program.

Are you, or will you be, taking coursework during the quarter immediately prior to the term listed below? ☐ Yes ☐ No

Registration for term of degree completion: Term _____ Year _____

Those who have completed class and will only take exams, please check here: ☐

Department Prefix and Course Number	Title	Credit

OFFICE USE ONLY

☐ Completion of above listed courses, with a 3.0 or better, for overall program and the major area, along with satisfactory completion of master's comprehensive examinations will fulfill requirements for the master's degree. Those being certified to teach must also be sure of fulfilling those requirements.

☐ Evaluation of your program indicates the following deficiencies: _____

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