CALIFORNIA STATE UNIVERSITY, SACRAMENTO
DEPARTMENT OF HISTORY

SPECIAL PROBLEMS PETITION
CULMINATING REQUIREMENT

DATE _____________________________________________

NAME ____________________________________________          SEMESTER _______________ YEAR__________

ADDRESS _________________________________________          SAC STATE ID** # ______________________________

**Note: this is not your social security number, this number can be found on your MySacState profile

TELEPHONE NUMBER _____________________________ EMAIL __________________________________________

Please check appropriate MA Program:  ☐ History  ☐ History/Humanities  ☐ Public History

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<th>Requirements for being registered for the Culminating Requirement</th>
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<tr>
<td>Petition for Approval of Examination/Thesis/Project on file in Department (attach copy)</td>
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**NOTE: No more than 9 units of supervisory courses (HIST 195, 199, 295, 297, 299, 400, 500 or HRS 299 or 500) may be counted toward the History M.A. Degree (except in Public History Program).

HIST 500 A - Thesis

Call Number: ____________   Units     3

Major Field Advisor          Date Department Chair                                                              Date

HIST 500 B - Project (PUBLIC HISTORY ONLY)

Call Number: ____________   Units     3

Major Field Advisor          Date Department Chair                                                              Date

HIST 500 C - Examination

Call Number: ____________   Units     3

Major Field Advisor          Date Department Chair                                                              Date

Distribution: Original - Department _____      Copy - Student _____      Copy - Major Field Advisor _____ (updated 1/22/09)

Grade: _______ Initials: _______ Date: _______