

CHDV MA Continuous Enrollment (599) Form

Enrollment in 599 is a two-step process. FIRST, complete this form to submit to the CHDV Graduate Coordinator. SECOND, take your signed Continuous Enrollment 599 form to submit payment.

Name _____

Student ID number _____

Email address _____

First semester of enrollment in CHDV MA program: FALL or SPRING, YEAR: 20____

How many times have you enrolled in CHDV 504? _____

Most recent semester of enrollment in CHDV 504: FALL or SPRING, YEAR: 20____

After this most recent CHDV 504 enrollment, you may take up to 3 semesters of continuous enrollment (summer is not included). How many semesters of 599 have you taken since your last CHDV 504 enrollment? _____

What is your plan to make progress this semester? Discuss with your sponsor. _____

_____.

When do you expect to graduate (complete your culminating experience)? _____

Student signature

Date

Faculty sponsor

Date

Graduate coordinator

Date

Note this is a department (GSPE) document and does not replace the OGS form for continuous enrollment, which still needs to be submitted as indicated on that form.