CHDV MA Elective Approval Form

This form should be completed PRIOR TO enrolling in your elective course and in consultation with a faculty advisor regarding your program goals. If in CHDV or a closely related field, it should likely be a graduate level course. If in a different field, upper division coursework may be acceptable.

NameStudent ID number Email address			
		Elective chosen (course code and title)	
		Semester of anticipated enrollment	
How will this elective enhance your education	nal goals in the CHDV MA program?		
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Have you submitted your advancement to ca	ndidacy?		
If yes, is this course the one you listed	d on that form as an elective?		
If you did NOT list it, you need to file	a "petition for exception" with OGS prior to graduating		
Student signature	 Date		
Faculty advisor	Date		
Graduate coordinator	 Date		

Submit this form to the CHDV Graduate Coordinator for approval and placement of this form in your file. If you choose a different elective, a new form must be submitted prior to enrollment. Note this is a department (GSPE) document and does not replace the OGS form for advancement to candidacy or petition for exception.