

SAN DIEGO STATE UNIVERSITY
Division of Graduate Affairs
SSE 1410 (619) 594-5213
grad.sdsu.edu
gra@mail.sdsu.edu

The Master's Degree Program in Interdisciplinary Studies

OFFICIAL USE ONLY

Active

Inactive

Degree Earned _____

(TYPE OR PRINT CLEARLY)

Last Name First

RED ID

Street Address Apt/#

Date

City State Zip Code

Students must complete the following with required signatures to be moved to classified status.

Proposed Interdisciplinary Degree Title

Three words or fewer that describe the field or area of study, use words other than those that identify graduate programs currently offered as San Diego State University to indicate your interdisciplinary interests.

Explain how the courses and disciplines that make up your program are interrelated and complementary to one another. In other words, what makes your program academically coherent? (In 150 words or fewer)

(TYPE OR PRINT CLEARLY)

Name _____

RED ID _____

Program Endorsement

To be endorsed by chairs of departments offering courses on the program of study and by the college dean(s) having responsibility for these departments.

_____/_____/_____/_____
 Department Print Name (Chair) Signature Date

_____/_____/_____/_____
 College Print Name (Dean) Signature Date

_____/_____/_____/_____
 Department Print Name (Chair) Signature Date

_____/_____/_____/_____
 College Print Name (Dean) Signature Date

_____/_____/_____/_____
 Department Print Name (Chair) Signature Date

_____/_____/_____/_____
 College Print Name (Dean) Signature Date

Faculty Thesis Committee

List the names and departments of the faculty members who will serve on your Thesis Committee. Thesis Committee must consist of at least three faculty members and must have members from at least two departments.

_____/_____/_____/_____
 Department Print Name (Chair) Signature Date

_____/_____/_____/_____
 Department Print Name Signature Date

_____/_____/_____/_____
 Department Print Name Signature Date

_____/_____/_____/_____
 Department Print Name Signature Date

Final Approval

_____/_____
 Dean of Division of Graduate Affairs (signature) Date