

**Master's Accelerated Program Referral Form**

Student Name: _____	Aggie ID Number: _____	Undergraduate College: _____
Dual Degree Program: _____		Senior Petitioner: _____
Email: _____		

**Important information**

Completed form must be submitted to the Graduate School by the FIRST FRIDAY OF CLASSES of the semester in which the course is to be completed. Undergraduate students interested in the Master's Accelerated Program should consult with their anticipated Master's program department head. The Master's Accelerated Program is only applicable if the student has not yet completed a bachelor's degree or been accepted to the Graduate School at New Mexico State University via graduate admissions. **It is the student's responsibility to contact financial aid as awards may be adjusted by the Financial Aid Office.**

**Registration**

The students are responsible for registering themselves in the course; if the course is not open or requires instructor approval, obtain appropriate signatures or approval from the instructor.

1. Students accepted into the accelerated master's program, must participate in the Developing New Scholars Program (DNSP), offered by the Graduate School. The purpose of DNSP is to create access for success in graduate education by providing formal mentoring.
2. The following signatures are required: the undergraduate advisor, undergraduate Academic Dean, and the anticipated master's Department Head on this Accelerated Master's form and submits the form to the Graduate School by the first Friday of classes.
3. Graduate School confirms the conditional admittance of the student and sends a copy with signature to the student, instructor, and undergraduate college.
4. When the student graduates with the Bachelor's degree and receives final admissions into the master's program, the following approved 12 graduate credit hours will be transferred from undergraduate to graduate transcript.

Term	CRN	Subject	Number	Credits	Final Grade	Graduate Advisor Approval

**Acknowledgement**

\_\_\_\_\_  
Student Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Undergraduate Advisor Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Anticipated Master's Department Head Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Undergraduate Academic Dean Signature

Date: \_\_\_\_\_

**FOR GRADUATE SCHOOL USE**

CLASSIFICATION	CUM GPA	CUM HOURS EARNED	GRADUATE SCHOOL APPROVAL