

Intent to complete CLAS Bachelor's degree to Master's degree program

Student, major advisor and graduate advisor must sign this form and submit it to the CLAS Advising office NC 1030 or to clas_advising@ucdenver.edu. Routing this form via CU Denver official email can substitute for a physical or electronic signature when necessary.

Student: I acknowledge that I have spoken to an undergraduate and graduate program advisor and authorize the CLAS advising office to change my student record to indicate that I am participating in the program selected above. I intend to complete graduate level courses that will apply to the prescribed curriculum of the undergraduate degree and if I am accepted, to the graduate degree. I acknowledge that if I decide not to pursue the graduate degree, I must notify my program advisors and the CLAS advising office so that my student record can be updated to reflect that change of decision. I understand that I must apply and be admitted to the graduate program and am not guaranteed admission. I understand that all courses must be approved, I cannot exceed the maximum allowed graduate-level credits in my undergraduate degree and that graduate tuition and fees apply to all graduate level courses.

Student ID: _____

Student name (please print): _____

Student signature: _____ **Date:** _____

Major and Graduate program Advisors: I have met with this student and authorize that they have met the criteria to be matriculated into the program indicated above. I have advised them of the eligibility requirements to apply to the graduate program and have informed them of the ways their undergraduate and graduate degrees will change, including the maximum number of graduate credits that can be taken in the undergraduate career and applied to both degrees. I have referred the student to their CLAS advisor, Financial Aid and Bursar, to learn more about the other things they need to consider for this program.

Undergraduate major advisor name (please print): _____

Undergraduate major advisor signature: _____ **Date:** _____

Graduate program advisor name (please print): _____

Graduate program advisor signature: _____ **Date:** _____