Application for Dual Degree

Two Degrees Between Two Colleges

_____   _____
Student's Name   BGSU ID Number

_____   _____
Local Street Address   E-mail address

_____   _____
City   State   Zip Code   Telephone Number (local or cell)

College Currently Enrolled ☐ A&S ☐ BA ☐ EDHD ☐ FIRE ☐ HHS ☐ MUSIC ☐ TECH

Current major, specialization, minor and/or cognate: _____

Proposed dual degree in what Major? _____

Number of Semesters Completed at BGSU _____   Hours Completed _____

Brief rationale for proposed dual degree program: _____

_____

_____

_____

_____   _____
Date of expected graduation   GPA

_____   _____
Student's Signature   Date

☐ Acknowledged: Courses used to fulfill major or minor requirements for one degree **cannot** be re-used to satisfy major or minor requirements for the other degree. Please consult the College of Arts and Sciences in 374 Central Hall if there are questions.

Note: You will need a minimum of 142 hours to graduate plus all degree requirements (BG Perspective)

Office Use Only

☐ Approved
      or
☐ Denied   _____   _____
                 Authorized College Approval   Date