

Idaho State
UNIVERSITY
Department of Anthropology
Graduate Program of Study

Planned Program _____ Date submitted _____

Final Program _____ Date submitted _____

Student Name _____ Student Number _____

Address _____ City, State Zip _____

Department _____ Degree Sought _____

Major Advisor _____

Departmental Committee Members _____

G.F.R. _____

List the courses that you wish to apply to your degree. All transfer courses must be converted to semester credits.

600-level courses					
Dept. Course #	Title	Credits	Grade	Year	Institution
500-level courses					
Dept. Course #	Title	Credits	Grade	Year	Institution
Out-of department courses					
Dept. Course #	Title	Credits	Grade	Year	Institution

Student's Signature Date

Major Advisor's Signature Date

Chairperson's Signature Date

Graduate Dean's Signature Date

non-thesis option *or*

thesis option

Total 500 level credits _____

Total 600 level credits _____

Total Credits _____