

The Graduate School

Prescribed Program Request Form

Applicants for Master's degree programs with an overall undergraduate GPA between 2.30 & 2.74 may be admitted with a Prescribed Program Request Form

The Prescribed Program Request Form must accompany a memo addressing why the department would like to admit the student and must be submitted to the Graduate School as soon as possible after an admit recommendation has been submitted. The Prescribed Program Request Form must be approved by the major advisor, Graduate Program Director, and the Graduate Dean, and will result in the student being admitted to regular Graduate Standing.

- International Applicants (other than those who graduated from UNR) are not eligible to be admitted on a Prescribed Program.
- A student enrolled on a prescribed program is ineligible for any type of Graduate Assistantship.

A successful Prescribed Program consists of the completion of one (1) semester or summer session of full-time study in nin (9) redits, or twelve (12) credits over two (2) consecutive semesters, with a grade of "B" or better in <u>each</u> course taken. A Prescribed program must be designed to improve on the scholarship not apparent in the student's undergraduate studies. The courses prescribed in a) be indergraduate or graduate courses. If undergraduate courses are taken they cannot apply to a graduate program of study, and graduate it well course's may or may not apply to the graduate program of study. With approval of the Prescribed Program, the student may register in the courses specified; the student must successfully complete the Prescribed Program to continue in regular Graduate Standing.

I agree to the terms grade of "B" or be	s and conditions as described by tter within the time limits state	y this Prescribed Prog d, I understand that I	gram, and if I do not successfi may be removed from grafua	illy complete at standing.	each course listed with a	
Student's Signature		Date	Date		Student's NSHE ID Number	
Courses to be con	npleted during the prescribed	programi;	60			
Dept	Course #	# of Credits	Instructor		Semester	
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Main Advinus C	- X	Maian Ada		Date		
Major Advisor's Signature		Major Adv	Major Advisor's Name			
Graduate Program Director's Signature		Graduate F	Graduate Program Director's Name			
Graduate Dean's Signature		Date	Date			