

**WESTERN NEW MEXICO UNIVERSITY**  
**Degree Plan - Master of Arts - Interdisciplinary Studies (4908)**  
**Two Fields of Study**

**Student Name:** \_\_\_\_\_

**ID#** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

\_\_\_\_\_  
(Please include street, city, state, & zip code)

**Email:** \_\_\_\_\_

**Expected Completion:** \_\_\_\_\_

**Catalog Authority:** \_\_\_\_\_

**Thesis Capstone Exit Exam Date Completed:**

**Field A exit:**      ☐      ☐      ☐      \_\_\_\_\_

**Date Admitted**

**Field B exit:**      ☐      ☐      ☐      \_\_\_\_\_

**to Graduate School:**

**Mid-Point Self-reflection essay:** \_\_\_\_\_

**Exit Essay Completed:** \_\_\_\_\_

**Field A (18 credit hours minimum)**

**Concentration:**

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		

**Field B (9-18 credit hours minimum)**

**Concentration:**

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		
Course: _____ ( ) _____			Course: _____ ( ) _____		

**Total Credit Hours:** \_\_\_\_\_

(A minimum of 36 hours required.)

**Copy to Registrar on:**      Date: \_\_\_\_\_

**Grad. Audit sent on:**      Date: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_      Date: \_\_\_\_\_

**Advisor or Department Chair/Associate Dean Signatures: (please follow program preferences)**

**Field A:**      \_\_\_\_\_      **Signed as:**      **Advisor:** ☐ **Chair/Dean** ☐  
Signature      Date      Select One

**Field B:**      \_\_\_\_\_      **Signed as:**      **Advisor:** ☐ **Chair/Dean** ☐  
Signature      Date      Select One

**Chair, Interdisciplinary Studies:** \_\_\_\_\_      Date: \_\_\_\_\_

**Dir of Graduate Division:** \_\_\_\_\_      Date: \_\_\_\_\_

Note: All graduate credit, including transfer credit, must have been earned within the seven years prior to issuance of the graduate degree