

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

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

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

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

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

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

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

**Date Completed:** \_\_\_\_\_

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

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

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

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

**Date Admitted**

**to Graduate School:** \_\_\_\_\_

It is recommended that at least 18 credit hours are completed in one of the fields of study and that a minimum of 9 is required for any **additional** field of study. Student may choose two or three fields of study. (Field A and B **or** Field A, B, and C)

**Field A (18 credit hour 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: _____ ( ) _____		

**Field B (9 credit hour minimum)**

**Concentration:** \_\_\_\_\_

Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		

**Field C (9 credit hour minimum)**

**Concentration:** \_\_\_\_\_

Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		
Course: _____ ( ) _____		

**Total Credit Hours - 36 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:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Signed as:** **Advisor:** ☐ **Chair/Dean** ☐  
Select One

**Field B:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Signed as:** **Advisor:** ☐ **Chair/Dean** ☐  
Select One

**Field C:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Signed as:** **Advisor:** ☐ **Chair/Dean** ☐  
Select One

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

**Date:** \_\_\_\_\_

**Director 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.