

APPLICATION FOR SIMULTANEOUS GRADUATE DEGREE

Graduate students who want to pursue simultaneous graduate-level degrees use this form to apply. Students must obtain approval from both academic departments to add the second graduate level degree.

Last/Family Name	First/Given Name	Middle Name
Last 4 digits of VT ID: _____ if known	Citizenship U.S. Citizen Permanent Resident Non-U.S. Citizen* *If non-U.S. citizen, please list your visa status: _____	
E-mail Address: _____ @vt.edu account, preferred		

Current Program: _____	Current Degree Level: Doctoral Education Specialist Master's
In addition to my current program, I simultaneously wish to seek the following additional program:	
Additional Program: _____	Degree Level: Doctoral Education Specialist Master's _____ Specify Master's Degree Type
First Term of Additional Program Enrollment FALL SPRING SUMMER YEAR _____	Campus: Blacksburg Hampton Roads National Capital Region Richmond Roanoke Southwest Virginia Virtual

STUDENT Signature	Date (MM/DD/YY)		
CURRENT PROGRAM COMMITTEE CHAIRPERSON Signature	Printed Name	e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
CURRENT PROGRAM DEPARTMENT HEAD Signature or authorized GRADUATE PROGRAM DIRECTOR	Printed Name	e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
CURRENT PROGRAM DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature	Date (MM/DD/YY)		
ADDITIONAL PROGRAM COMMITTEE CHAIRPERSON Signature	Printed Name	e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
ADDITIONAL PROGRAM DEPARTMENT HEAD Signature or authorized GRADUATE PROGRAM DIRECTOR	Printed Name	e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
ADDITIONAL PROGRAM DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature	Date (MM/DD/YY)		
GRADUATE SCHOOL Signature	Date (MM/DD/YY)		

Submit your completed form:

<http://tiny.cc/VTgradforms>

120 Graduate Life Center, Blacksburg
NVC 7054 Haycock Road, Falls Church
For assistance, call 540-231-8636 or
e-mail grads@vt.edu