University of Central Missouri
INDIVIDUALIZED STUDIES MAJOR PROPOSAL

Date: **Drawn up by:**
Student Name: **Student Number:** 700   **Catalog Year:** (Ex: 202310 = Fall 2022)
Degree: (Ex: B.S. or B.A.)   **Major:** (Individualized Studies)   **Minor:** (none required, but is allowed)
Graduation Semester: (Ex: 202410 – Fall 2023)

In addition to meeting all university graduation requirements (general education, hours, residency, grade point averages, etc.), the Individualized Major Curriculum must include the following:

- A minimum of 120 hours for the degree, including 30 hours at UCM
- A minimum of 30 upper-level (3000/4000) hours, including 20 hours at UCM
- A minimum of 40 major credit hours overall, 15 of them completed at UCM
- A minimum of 12 hours of upper level in major, 9 of them completed at UCM
- A minimum grade point average of 2.00 in all work at UCM, cumulative GPA, major GPA, and minor GPA (if applicable).

Major Curriculum:

Total Hours: _____ hours

Semester	Course Prefix/Number	Title	Grade	Hours

(Denote Competency 10 course with a "*" for any student following the 2014 to 2021 catalogs.)

Additional Remaining Requirements for Graduation:

- Apply for graduation one semester before your intended graduation date. If this contract is approved during your last semester, apply for graduation after receipt of the final signed contract from the Academic Programs and Services' Office. You may apply online in MyCentral in the Student Services tab.

I understand the following:
- My diploma and transcript will show that I have earned a major in Individualized Studies.
- I accept full responsibility for this Individualized Studies proposal and understand that it does not guarantee acceptance outside of UCM.

1)_____
Student Signature   Date

_____
Student Email

_____
Student Street Address

_____
Student City/State/Zip

2)_____
Department Faculty Signature   Date

_____
Print Name (Faculty Signature)

3)_____
Department Chair Signature   Date

_____
Print Name (Department Chair)

4)_____
College Dean Signature   Date

_____
Print Name (College Dean)

5)_____
Office of the Registrar and Student Records   Date

6)_____
Vice Provost for Academic Programs and Services   Date