

## Fulfillment of Course Requirements for Master's Degree

Name (Last, First): \_\_\_\_\_ Student ID #: \_\_\_\_\_@00

Current Program: \_\_\_\_\_ Current Level:  MS  PhD

I expect to receive an MS degree in the \_\_\_\_\_ program in \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Student:**

1. Attach a printout of your unofficial transcript from SURFS **or** list\* on a separate sheet ALL of the UMB courses (including research, independent study, etc.) *which will apply toward this MS degree*. Courses that do not count toward your degree will show as "Non-Applicable" on your permanent record.

\* If you choose to list your course information on a separate sheet, include the following details for each course:

COURSE PREFIX, NO.	TITLE	SEM/YEAR	CREDITS	GRADE
E.g.: <i>PREV 600</i>	<i>Prin. of Epidemiology</i>	<i>Summ 2013</i>	<i>3</i>	<i>B+</i>

2. List any graduate transfer credits from other institutions that have been accepted for this MS degree:  N/A

COURSE PREFIX, NO.	TITLE	INSTITUTION	SEM/ YEAR	CREDITS	GRADE
E.g.: <i>BIO 602</i>	<i>Prin. of Biostatistics</i>	<i>Univ of Massachusetts</i>	<i>Summ 2014</i>	<i>3</i>	<i>A-</i>

3. Present this form and your unofficial transcript/list of courses to your Faculty Advisor and Graduate Program Director for review and signature.

**Faculty Advisor:**

1. Please review this form and attached unofficial transcript/list of courses.
2. Clearly indicate which courses apply to this MS degree and which, if any, do not. If all of the courses on this student's record count toward this MS degree, please write "All for Degree" on the unofficial transcript/list of courses and initial it.

**The undersigned have reviewed the coursework and credits required for graduation from the above program and certify that this student has fulfilled all course requirements for the MS degree.**

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Printed Name: \_\_\_\_\_

Graduate Prog. Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Prog. Director's Printed Name: \_\_\_\_\_

Submit this form to the Graduate School by e-mail, fax, mail, or delivery.

Graduate School  
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