Accelerated Graduate Degree Program (AGDP)
Acknowledgment and Approval Form

The Accelerated Graduate Degree Program (AGDP) is intended for a) CMU undergraduate students who possess a strong academic background; b) are maintaining a “B” average in their undergraduate coursework; c) are generally going into their senior year; and d) plan to complete their graduate degree at CMU. The program allows for specifically identified 500- and 600-level graduate courses to be double-counted toward undergraduate and graduate degrees. Students should submit an online application at apply.cmich.edu for admission to the accelerated program.

Student: ___________________________  Student ID#: ______________

Accelerated Graduate Program: ________________________________

AGDP First Semester: __________  Expected Bachelor’s Graduation Date: ______________

Section I – Identification of Double-Counted Courses
The above referenced student is approved to complete the following courses as part of their AGDP. ONLY list the 500- and 600-level courses that are to be double-counted toward the undergraduate and graduate degrees. Note: a student can only double-count up to 50% of the graduate program.

<table>
<thead>
<tr>
<th>Course #  (ex. BIO 500)</th>
<th>Course Title</th>
<th>Credit(s)</th>
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Undergraduate Advisor Approval (Optional):
I approve these double-counted courses and have reviewed the statements in Section II.

Name: ___________________  Signature: ___________________  Date: ______________

Graduate Advisor Approval:
I approve these double-counted courses and have reviewed the statements in Section II.

Name: ___________________  Signature: ___________________  Date: ______________
Section II – Student Acknowledgment

1. I understand that with successful completion my undergraduate degree and all AGDP program requirements, up to 50% (500-600-level courses) of my graduate program courses may come from my earned CMU undergraduate degree. Each department has authority to set the maximum number of credits as long as it does not exceed 50% of the program.

2. I understand that, generally, courses required on the undergraduate major may not be counted toward the graduate program and my status cannot be changed mid-semester to be an accelerated student.

3. I understand that once admitted in an AGDP I will not be able to register myself for any courses, this will be enforced via a hold on my student account. I will need to contact the Registrar’s Office to be registered for all courses. I will be limited to a maximum total of 15 credits per semester while enrolled in my AGDP; my graduate course registrations are limited to the approved courses on the first page of this form along with my undergraduate courses. If different AGDP courses are needed, my advisor will need to complete and submit an Accelerated Amendment form.

4. I understand it is my responsibility to inform the professor that I am enrolling in the courses listed on the first page as an AGDP student and need to follow the graduate syllabus for the course(s). Failure to follow the graduate syllabus will result in the course(s) being ineligible for use at the graduate level.

5. I understand that per Graduate Studies policy, I must earn at least a “B” average in my AGDP courses and if I do not maintain at least a “B” average in my AGDP courses, I will be required to create a viable plan to earn a “B” average or I will be removed from the AGDP.

6. I understand that if removed from the AGDP, any completed courses can be used towards the undergraduate program but will not be usable towards a graduate degree and I must apply again as a graduate student if I wish to pursue a graduate degree upon completion of my undergraduate degree.

7. I understand that I will pay the applicable undergraduate tuition rate for the approved AGDP courses listed in Section I of this form.

Student Acknowledgement:
I have reviewed and acknowledge the above seven statements.

Name: __________________________ Signature: __________________________ Date: __________

Graduate Studies Approval:

Name: __________________________ Signature: __________________________ Date: __________