

# USC Progressive Degree Program

## Application for Admission to Progressive Master's Program



*Enter all remaining requirements for the bachelor's degree and all master's degree requirements chosen in consultation with the graduate advisor. This information will be used to create your master's program STARS report if your application is accepted. In addition to the master's courses identified on the course plan, all other requirements for Master's degree completion must be satisfied/waived on the STARS report. Submit this application to the graduate department with supplemental materials as required for admission.*

Printed name of student (Last)	(First)	(Middle)
USC ID Number	Email address	Phone Number
Current Major(s)/Minor(s)	USC GPA	Units Completed
Proposed Master's Program	Proposed Admit Semester/Year	
Department/School	Expected Graduation Semester/Year	

### Proposed Course Plan

List courses and units to be taken to fulfill all remaining degree requirements on your STARS Report at the time of application. **Exact** courses must be listed for each master's core requirement; electives may be listed as "graduate degree elective". Elective coursework can be decided later by the student with approval from their graduate program advisor.

- Begin with the current semester. If this is a revised course plan, begin with the term in which the first master's course was or will be completed.
- Check "UG" for courses to be taken to fulfill bachelor's requirements; check "GR" for courses to be taken for the master's degree.  
**Only ONE box (UG or GR) should be checked for each course.**
- The Proposed Course Plan must be agreed upon and approved by the student, and *both* the Undergraduate and Master's Departments

	Dept. Prefix - Course #	UG	GR	Course Title	Units
<b>Semester/Year</b>					
<b>Total Units</b>					
	Dept. Prefix - Course #	UG	GR	Course Title	Units
<b>Semester/Year</b>					
<b>Total Units</b>					
	Dept. Prefix - Course #	UG	GR	Course Title	Units
<b>Semester/Year</b>					
<b>Total Units</b>					

### Proposed Course Plan Continued...

	Dept. Prefix - Course #	UG	GR	Course Title	Units
<b>Semester/Year</b>					
<b>Total Units</b>					
	<b>Dept. Prefix - Course #</b>	<b>UG</b>	<b>GR</b>	<b>Course Title</b>	<b>Units</b>
<b>Semester/Year</b>					
<b>Total Units</b>					
	<b>Dept. Prefix - Course #</b>	<b>UG</b>	<b>GR</b>	<b>Course Title</b>	<b>Units</b>
<b>Semester/Year</b>					
<b>Total Units</b>					

- ☐ This is the original course plan submitted with the program application; all signatures below are required.
- ☐ This is a REVISED course plan for an existing approved program; only the impacted degree program signatures and student signatures below are required.

#### ***To be completed by the Undergraduate Program***

*The undergraduate course sequencing listed on this course plan is:*

☐ *Recommended*

☐ *Not Recommended*

Major Department/School

Date

Undergraduate Academic Advisor's Signature

Printed Name

*The undergraduate course sequencing for a second major listed on this course plan is (if applicable):*

☐ *Recommended*

☐ *Not Recommended*

Major Department/School

Date

Undergraduate Academic Advisor's Signature

Printed Name

***To be completed by the Master's Program***

First College Term (Sem/Yr): \_\_\_\_\_ Master's Program Post code: \_\_\_\_\_

Total units **required** for the master's program: \_\_\_\_\_ Minimum progressive degree units required for graduation: \_\_\_\_\_

Semester/Year in which 144 total units will be completed: \_\_\_\_\_ Total semesters of registration after completion of 144 units: \_\_\_\_\_

Semester and Year of Progressive Degree Completion: \_\_\_\_\_ 2/3 500-level requirement is met based on proposed plan, Yes No  
excluding 594 course units

*The Proposed Course Plan has been agreed upon and approved by the Master's Departments.*

Master's Program Academic Advisor's Signature Printed Name Date

*By signing on the line below, I confirm that I have read and reviewed the [Program Requirements](#) and understand how they apply to my specific situation.*

1. I have reviewed the semester/year in which 144 total units will be completed.
2. I understand that I will transition to graduate student status (including tuition rates and eligibility for USC Financial Aid) as soon as any of the following occurs:
  - a. I complete 144 total units
  - b. My first bachelor's degree is conferred
  - c. I receive a research or teaching assistant award
3. I will be subject to undergraduate academic progress standards while in undergraduate status and master's academic progress standards while in graduate status.
4. My degrees may be awarded in the same semester, but my master's degree cannot be awarded before the undergraduate degree.
5. The time limit for completing a progressive degree program is 12 semesters (6 years) beginning from the first term of any college enrollment, including any semesters of non-enrollment\*.
6. I may complete only one master's degree as part of the progressive degree program.
7. (For F-1 or J-1 international students) I have conferred with the Office of International Services regarding my immigration status. I understand that I must submit a PDP I-20 Request in Trojan International once I have been reclassified as a master's level student.
8. Upon admission, I will make certain my undergraduate expected graduation date aligns with this course plan.

\* Students pursuing the five-year Bachelor of Architecture program will have a 176-unit limit due to the increased unit requirements for the degree. Except in the case of unapplied transfer units as described in the policy, no other exceptions to the 144-unit limit will be made.

\*\*Transfer students whose transfer coursework extends beyond this timeline may have their coursework evaluated for semester-equivalency by the admitting master's program.

*I hereby apply for admission to the Progressive Master's Degree Program. My Proposed Course Plan is attached and has been approved by my undergraduate and master's program advisors.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***To be completed by the Master's Program***

*Based on the Proposed Course Plan and additional documentation, the student is:*

☐ Recommended for Admission ☐ Not Recommended for Admission

Master's Program Admissions Department Signature Printed Name Date

**The department liaison should process the approved Application in SIS by adding the PoST code and sending electronic copies of all supporting documents to ESD ImageViewer.**

Department Liaison SIS Initials Code: \_\_\_\_\_

Date documentation shared to ESD/Image Viewer Date PoST Added in SIS



## USC Progressive Degree Program Recommendation Form

*Instructions for student:* Fill in the top portion of this form and present it to your recommender.

*Instructions for faculty:* Return this form to the department coordinator listed below.

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Department coordinator for application	Coordinator's email address
(Please type or print)	

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Printed name of student (Last)	(First)	(Middle)
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Department to which you are applying	Email address
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- ☐ I waive my right to inspect the contents of the following recommendation.
- ☐ I do NOT waive my right to inspect the contents of the following recommendation.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Recommender Section:** Please write candidly about the student's qualifications and potential to pursue advanced study in the field specified.

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Admission to Progressive Degree Program is:

- ☐ Strongly recommended      ☐ Recommended      ☐ Recommended with reservations      ☐ Not recommended

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Signature	Printed Name	Date
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## USC Progressive Degree Program Recommendation Form

*Instructions for student:* Fill in the top portion of this form and present it to your recommender.

*Instructions for faculty:* Return this form to the department coordinator listed below.

Department coordinator for application

Coordinator's email address

(Please type or print)

Printed name of student (Last)

(First)

(Middle)

Department to which you are applying

Email address

☐ I waive my right to inspect the contents of the following recommendation.

☐ I do NOT waive my right to inspect the contents of the following recommendation.

Student Signature: \_\_\_\_\_

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

**Recommender Section:** Please write candidly about the student's qualifications and potential to pursue advanced study in the field specified.

Admission to Progressive Degree Program is:

☐ Strongly recommended

☐ Recommended

☐ Recommended with reservations

☐ Not recommended

Signature

Printed Name

Date