

**Individually Tailored Area of Concentration**  
**Pre-2004 curriculum requires 3 courses**  
**Post-Fall 2004 requires 2 courses**

*Plan Approval Form*

*This form must be on file in the Student Affairs Office before the student registers for classes for their second year or after 21 hours.*

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

Title: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Advisor: \_\_\_\_\_

Number                      Title

Course 1:

\_\_\_\_\_

Course 2:

\_\_\_\_\_

Course 3:

\_\_\_\_\_

Elective (required under old curriculum) or additional Courses:

\_\_\_\_\_

APPROVED: \_\_\_\_\_

Director of Graduate Studies

\_\_\_\_\_

Date

Changes Approved the Director of Graduate Studies: (DGS Please initial)

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