## University of Hawai'i at Mānoa • Graduate Division

Student Services • 2540 Maile Way, Spalding 354 • Honolulu, HI 96822 Tel:808.956.8544 • V/T:808.956.4257 • Email: gradss@hawaii.edu • Web: http://manoa.hawaii.edu/graduate/

## Disclaimer

Information contained herein is subject to change without notice and supersedes information contained in the UHM Catalog. For current information on graduate studies, please visit the UHM Graduate Division web site for prospective students as listed above.

## **Petition to Apply for Concurrent Degree Status**

A current UHM graduate student who wishes to pursue an additional graduate degree concurrently must obtain advance approval from the Graduate Dean. With approval, a student may apply for admission to an additional program after completing one year of study in the first program. Concurrent doctorates are not permitted. Return the completed petition to the Graduate Division-Student Services (address below) at least two weeks before the graduate program admissions deadline. Note that approval of this petition only grants permission to apply and does not imply admission. Approval is not required to apply to official dual degrees or to graduate certificate programs.

| Part I. To be completed by the student                         |                                       |                              |  |
|--|---------------------------------------|------------------------------|--|
|  |                                       |                              |  |
| Name LAST, FIRST M.I.  |                                       | UH ID no.                    |  |
| I am currently enrolled in: (List degree and grad              | duate program.)                       |                              |  |
| I am seeking concurrent degree admission for t                 | the 🗆 Fall 20 🗅 Spring 2              | 20 into the (List degree and |  |
| graduate program. Include specialization if app                | olicable.)                            |                              |  |
| Reason for Concurrent Degree Consideration_                    |                                       |                              |  |
| I certify that I have read and understand the po               | licies and instructions on this form. |                              |  |
|  |                                       |                              |  |
| Signature of Student/Applicant                                 | Date                                  | Email Address                |  |
| Part II. To be completed by the graduate                       | chair                                 |                              |  |
| The above student has notified our program of                  | his/her intent to pursue concurrent   | graduate degree standing.    |  |
| We □ support □ do not support this action.                     |                                       |                              |  |
| Student has been awarded:                                      |                                       |                              |  |
| ☐ Graduate Assistantship ☐ Tuition Waiver                      | \$                                    | None                         |  |
| Graduate Chair Signature                                       | Graduate Program                      | Date                         |  |
| OFFICE OF GRADUATE EDUCATION ACTION  ☐ Approved ☐ Not Approved |                                       |                              |  |
|  | REASON FOR DISA                       | REASON FOR DISAPPROVAL       |  |
| By: Date:  |                                       |                              |  |