# UAF
## UNIVERSITY OF ALASKA FAIRBANKS

## Undergraduate Interdisciplinary Studies
*Approval Form*

Student's Name _____    Student ID _____

Address _____    Email _____

Phone _____    UAF GPA (2.0 minimum) _____

Degree _____    Catalog year _____

Major (Proposed title of interdisciplinary major) _____

Minor (required for BA degree only) _____

Students must attach a written proposal describing their interdisciplinary major. Interdisciplinary bachelor's and associate's degrees must include courses from at least two different departments and require a minimum of 30 credits in the major. Bachelor's degrees must have at least 12 resident credits in the major. After initial approval, changes to interdisciplinary majors can be made by a petition signed by a student's committee chair and the vice provost.

## Courses to include in major
Note: Transfer courses should use the UAF transfer course number, but should list the original course title in quotation marks if is not a UAF equivalent course. Transfer grades should have a 'T' before the letter grade.

| Course number | Course Title | Semester | Grade | Credits |
|---|---|---|---|---|
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# Undergraduate Interdisciplinary Studies
## *Approval Form*

Student's Name _____     Student ID _____

Major (Proposed title of interdisciplinary major) _____

Total credits in major _____     Resident credits in major _____
(Minimum of 30)                                                                                   (Minimum of 12 for bachelor degrees)

Student's interdisciplinary proposal attached     ☐ Yes   ☐ No

Capstone Description (required for bachelor's students using the 2016-2017 catalog or later)

Additional requirements and/or notes to UAF Graduation Services

The faculty chair will serve as the student's academic advisor for their degree. It is the responsibility of students to review the UAF Catalog (http://catalog.uaf.edu/) and Degree Works with their academic advisor to ensure the completion of all degree requirements for graduation.

Signing indicates that you have read and approve of this interdisciplinary degree plan:

| Faculty CHAIR of Committee: (Print) | Signature: | Department: | Date |
|---|---|---|---|
|  |  |  |  |
| Faculty members: (Print) | Signature: | Department: | Date |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

_____          _____
Student's Signature                                       Date

_____          _____          _____
Dean of Committee Chair's Signature          School/College                                            Date

_____          _____
Vice Provost's Signature                               Date