State University College at Buffalo **APPLICATION FOR ADMISSION TO CANDIDACY**

1300 Elmwood Avenue **MASTER OF ARTS**

Buffalo, NY 14222 **HISTORY**

*(To be submitted after completion of at least six (6), but not more than twelve (12) credit hours.)*

# NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT NO. \_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_**

***NOTE:*** A MINIMUM OF 15 HOURS OF GRADUATE WORK MUST BE COMPLETED IN 600-700 LEVEL COURSES.

**REQUIRED COURSES (18 Hrs.)**

*(Courses to be chosen under advisement. At least 12 credit hours must be History courses. Six credit hours may be taken in related disciplines, such as Political Science, Geography, English wit the expressed approval of the student’s advisor.)*

**COURSE NUMBER AND TITLE Sem. Hrs. Grade Anticipated Completion Date**

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**HISTORY SEMINARS (700 LEVEL) REQUIRED (6 Hrs.)**

HIS 703 Reading Seminar in History (3)  *\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

HIS 704 Research Seminar in History (3)  *\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**THESIS REQUIRED**

His 795 Master’s Thesis (6 Hrs.)  *\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**MINIMUM PROGRAM REQUIREMENTS: 30 HRS.**

Language Requirement \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or Substitute \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Oral Exam Completed: Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\*The following courses completed at OTHER INSTITUTIONS are presented for evaluation as part of the Master’s Degree. (10 semester hours maximum for graduates of SUNY units or if work is being transferred from other units of SUNY; in all other instances, 6 semester hours is the maximum hours eligible for transfer.) Only courses with grades A or B are acceptable. *Official transcripts must be sent by the college or university to the Office of Graduate Studies.*

## Name of Institution Course Sem. Hrs. Grade Anticipated Completion Date

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This program as outlined above has been reviewed. The applicant agrees to complete the program as described in order to meet the degree requirements. The candidate further agrees to abide by all regulations published in the graduate catalog.

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Date *Candidate*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Date *Advisor*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Date *Department Chair*

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DATE *Dean, FNSS*

**NOTE:** Changes in approved program must be requested on the form available from Department or Graduate Office. Changes must be approved by Advisor, Department Chair, and Faculty Dean.

**White Copy** – DEAN FNSS :: **Canary Copy** – GRADUATE STUDIES :: **Pink Copy** – DEPT. CHAIR :: **Gold Copy** - STUDENT