

UO ID _____ **Last Name** _____ **First Name** _____

UO Email _____ **Major** _____ **Term Admitted** _____

Degree Level (check one): Masters Doctoral If Master's, which degree? _____
(e.g., MA, MS, MBA, etc.)

Specialization Selection

Specialization: _____ **Term Declared:** _____
Enter the official name of the specialization you are declaring. The list of specializations can be found at graduatestudies.uoregon.edu/academics/programs/specializations

Student Signature: _____ **Date:** _____
(must be hand-drawn or confirmation of approval sent from UO email address)

Specialization Approval

By signing below, the department/program confirms that (1) this student has been admitted to the above-named specialization; (2) the student has met with the department/program and has a documented, approved course of study that establishes the requirements that must be completed for the above-named specialization.

Printed name: _____ **Date:** _____

Signature: _____
(must be hand-drawn or confirmation of approval sent from UO email address)

IMPORTANT INFORMATION ABOUT PURSUING SPECIALIZATIONS

Minimum Graduate School Requirements:

Students pursuing specializations are responsible for meeting minimum Division of Graduate Studies requirements as outlined on the Division website: <https://graduatestudies.uoregon.edu/academics/policies/specializations/pursuing-specialization>

Graduating with the Specialization:

No later than Friday of Week 2 in the term of graduation the student must apply for graduation online, indicating the specialization student plans to receive.

The department/program administering the specialization must submit Statements of Completion approving or denying awarding of the specialization by the Tuesday following the term's grading deadline.

Division of Graduate Studies Approval

Effective Term: _____