

CUNY SCHOOL OF LAW

Dual Degree Program Request Form

A student may seek approval from the Academic Affairs Office to begin classes for one of the dual degree programs. The request deadline is the last day of classes for your 1L year.

Last Name: First Name:

CUNYFirst ID: Current Class Year: 1L ☐ 2L ☐ 3L ☐

Signature: Date:

Current Program: Full-time ☐ Part-time ☐

Seeking Transfer to Dual Degree: JD/MPA ☐ JD/MA ☐ JD/MIA ☐

Indicate whether you intend to be a full or part time student: Full-Time ☐ Part-Time ☐

Indicate which academic year you will designate the partner school your “home” institution: _____

Please confirm that you have provided Academic Affairs a copy of your acceptance letter from the partner school: _____

Indicate name of advisor at the law school and at the partner school and date when you discussed the change with each:

Law school advisor: _____ Date: _____

Partner school advisor: _____ Date: _____

Projected schedule for each semester listed below.

Please indicate the courses you expect to take with the credit hours and school noted (for planning purposes only).

ACADEMIC YEAR	FALL COURSES	SPRING COURSES	SUMMER COURSES

ACADEMIC YEAR	FALL COURSES	SPRING COURSES	SUMMER COURSES

ACADEMIC YEAR	FALL COURSES	SPRING COURSES	SUMMER COURSES

Approved ☐ Denied ☐

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Academic Dean/Director of Academic Advising Signature

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Date

PLEASE DISTRIBUTE TO: Registrar; Financial Aid; Admissions offices