## Application for the 4+1 Dual Degree Program: Accelerated Bachelor of Science, and Master of Arts, in Mathematics (Accelerated B.S/M.A)

Date:				
Norma				
Name: First	M.I.	Last	Last	
Rowan I.D.#	email:			
Graduate Concentration (Pure	e Mathematics, Applied Mathematics or Sta	tistics):		
Supply the necessary informa	tion below to ensure you have met all the	preliminary 4+1 requirements	s:	
Are you currently enrolled in t	he B.S. in Mathematics undergraduate degr	ree program?	☐ Yes ☐ No	
Have you successfully completed a minimum of 24 credits of undergraduate Mathematics coursework			☐ Yes ☐ No	
Do you have a minimum undergraduate Mathematics (major) GPA of 3.5 in that same coursework?			□ Yes □ No	
Have you arranged for one let Department to be emailed to	ter of recommendation from a faculty mem nguyent@rowan.edu?	ber in the Mathematics	□ Yes □ No	
Name of the Faculty:				
Email of the Faculty:				
Submit your completed applic University.	cation to Dr. Thanh Nguyen, Department of	f Mathematics (Robinson 230	C), Rowan	
Student Signature			Date	
To be completed by the Grad	uate Committee:			
Action: Vote	e:			
Signature of Committee Chair		Date		