## **MIS Program Form Instructions**

- 1. Prior to working on this form, you should have met with the Interdisciplinary Graduate Programs coordinator. You should also have had at least one meeting with your full committee.
- 2. You can save data typed into this form. Please fill it out and save it as LastNameFirstNameMIS.pdf.
- 3. On section A, please identify your committee chair or co-chairs (you will have either one chair or two co-chairs). We recommend that you ask them for the official name of their departments. See information about Graduate Committee appointments at "http://www.umt.edu/grad/Interdisciplinary%20Graduate% 20Programs/Prospective%20Students.php" and UM Graduate School webpage at "http://www.umt.edu/grad/Academic%20Policies/The%20Masters%20Degree.php"
- 4. On section B, please identify the disciplines you are combining. These disciplines need to be represented by the members of your committee. Your committee is asked to share the completed copy of this form and your letter of intent with the department chairs of the disciplines identified in Section B. Department chairs are asked to send a memo verifying that they are aware of their faculty's involvement in the M.I.S. to "Interdisciplinary@mso.umt.edu".
- 5. On section C, please mark the appropriate options for your degree.
- 6. On section D, please list all anticipated courses that comprise your proposed MIS degree. For example, GPHY 491 ST: GIS applications would read:

Course Number Course Name Credits Semester/Year GPHY 491 ST: GIS Applications 3 cr Fall/XX

7. Remember, this course list is to be created with input from your prospective committee and be approved by them. All members of your committee are required to have a copy of this form before submission. Coursework should be listed in chronological order following the format provided above.

## MASTERS OF INTERDISCIPLINARY STUDIES (MIS) PROGRAM FORM

Applicant Name:						
Semester Applying For: (semester / year)				e:		
	`	. ,				
A. Identify your commit	ttee chair or your two co	o-chairs.				
Name		Department		Email		
	I (Must be at least two):					
1						
4						
C. Proposed MIS prog						
30 Credits and a	Thesis					
OR						
36 Credits, Comp	orehensive Exam and S	elect One of These Three Option	ns:			
☐ A pr	ofessional paper					
		or products that show creative wo conally recognized journal	ork			
	iper submitted to a natio	oriany recognized journal				
D. Course List (Please	e list all courses and the a	nticipated semester in which they	will be taken)			
Course Number	(	Course Name		Credits	Semester / Year	

Course Number	Course Name	Credits	Semester / Year
			-
			_