



Graduate Studies  
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**Request for Interdisciplinary  
 Graduate Study  
 ADV Form 1**

**IMAGING:** GRSInterDis  
 Admit Year/Term:

Student Name _____	BYU ID Number _____
Student Home Department (Dept to which student was admitted) _____	
Advisory Committee Chair _____	Advisory Committee Chair Home Department _____
Host Department (Dept where interdisciplinary study is desired) _____	Degree _____

It is proposed that \_\_\_\_\_ of the Department of \_\_\_\_\_ serve as the chair  
Faculty Member Advisor Home Dept.

of the graduate committee for \_\_\_\_\_ of the Department of \_\_\_\_\_  
Student Name Student Home Dept.

to receive a \_\_\_\_\_ degree in the Department of \_\_\_\_\_ .  
Name of Degree Host Dept.

**Please address the following issues:**

**Purpose**

What is the purpose of the proposed interdisciplinary study?

Are there similar interdisciplinary programs at other universities? If so, how does the proposed program compare?

**Study Design**

Describe the study requirements and curriculum.

What faculty members will be involved? Describe their special qualifications. How do their expertise and interests support this request?

### Resources

Describe the degree to which the home and host departments will be involved and the level of their support.

Will any additional course offerings, teaching assignments, research support, office space, travel, or equipment be required? If so, provide details.

### Supporting Materials

Attach any additional information, such as letters of recommendation or other materials that would support the relevance and academic content of the proposed interdisciplinary study.

### Approvals

I have read and approve the interdisciplinary study proposal.

Signature of Student	Date	Signature of Student Advisor	Date
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Signature of Student Home Dept Chair	Date	Signature of Student Home Dean	Date
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Signature of Advisor Home Dept Chair	Date	Signature of Advisor Home Dean	Date
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Signature of Host Dept Chair	Date	Signature of Host College Dean	Date
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Signature of Dean of Graduate Studies	Date
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<b>Office Use Only</b>				
<input type="checkbox"/> ADV06	<input type="checkbox"/> ADV07	<input type="checkbox"/> ADV08	<input type="checkbox"/> Sent to Depts	<input type="checkbox"/> Sent to student
			Initials _____	Date _____