



Student Information

Surname: _____ Given Name(s): _____
 UW ID #: _____ Email: _____

Current Program Information

Current Program: _____ Current Term (e.g. 3B): _____
 Next Co-op Term (e.g. Fall 2026): _____ CGPA: _____
 Expected BAsC Completion (mm/yy): _____

I have applied for or been awarded an NSERC USRA for a current or future term.
 Note term: _____

Accelerated Master's Academic Plan

Master's Supervisor(s): _____
 Admitting Department: _____ Start term of Master's: _____
 Annual Financial Support: _____

Courses to be taken for transfer to the accelerated master's program (max. two 0.5 weight)

Course Number	Course Title	Term

Co-op Research (briefly describe the research that will be conducted on research co-op term(s) and attach additional pages as required)

- _____
- _____

Signatures

Student: _____ Date (mm/dd/yy): _____
 Supervisor(s): _____ Date (mm/dd/yy): _____
 Associate Chair, Graduate Dept: _____ Date (mm/dd/yy): _____
 Associate Dean, Faculty: _____ Date (mm/dd/yy): _____