Application to take the Master's Exam

Department of Languages, Literatures and Cultures - 103 Jastak-Burgess Hall, University of Delaware

I. Name: _____ Circle One: LLCP or LLC

II. Address: _____

III. Telephone: _____

IV. Date you plan to take the Comprehensive Exam:

_____ late April/early May, 20____ _____late October/early November, 20____

V. Indicate area of specialization (Spanish LLC students only):____Peninsular_____Latin American

VI. LLCP students, please indicate which exam(s) you wish to sit at this time:

_____ Literature _____Pedagogy

VII. List the **course numbers and titles of the classes** you have taken which satisfy the requirements for the MA degree option you have chosen. Include as well the name of the instructor.

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IX. If you are graduating this semester, be sure to make separate application to the Graduate School (Application for Advanced Degree Form) by:

February 15 for May degree **September 15 for December degree**

Signed_____ Date _____