

**4 + 1 Program Application**

**Bachelor degree in Dietetics & Nutrition  
Master of Science degree in Adult Education**

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Middle Name:** \_\_\_\_\_

**Banner ID:** \_\_\_\_\_

**Current advisor:** \_\_\_\_\_

**Current GPA:** \_\_\_\_\_

**Current semester:** \_\_\_\_\_

**Number of credits at the end of this semester:** \_\_\_\_\_

**Term you were admitted to Buffalo State:** \_\_\_\_\_

**Term you plan to graduate:** \_\_\_\_\_

Please have the department chair of your **undergraduate program** sign this form.

To department chair: Signing this form indicates that this student is qualified for the Adult Education master's degree program here at Buffalo State. Your signature indicates your confidence in the student's success in the program. Thank you.

**Department Chair signature:** \_\_\_\_\_

Please submit this form to [adulthoodeducation@buffalostate.edu](mailto:adulthoodeducation@buffalostate.edu)

**Graduate program department chair:** After reviewing the student's qualifications in Degree Works, please indicate your acceptance of the student by signing this form and sending it to the Graduate School. Send directly to Jennifer Murray at [murrayje@buffalostate.edu](mailto:murrayje@buffalostate.edu)

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Thanks!!