

APPLICATION FOR ADMISSION TO CANDIDACY
For the Degree of
Master of Science in Accountancy, Taxation
College of Business & Economics, Boise State University

Student Name: _____ Date: _____
 Student ID #: _____ email: _____
 Address: _____
 Daytime Phone: _____ Anticipated Completion Date: _____

	Credit Hours	Semester / Year	Grade
Advanced Core Courses (15-21 credits)			
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____

Accountancy Electives (0-6 credits)			
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____

Approved Non-Accountancy Elective Courses (minimum 9 semester hours)			
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____
_____	()	_____	_____

Graduate Credits Transferred (9 credits maximum)			
Institution	Course #	Title	
			Cr. Hrs. BSU Course Sem/Yr Grade Replaced Completed
_____	_____	_____	() _____
_____	_____	_____	() _____
_____	_____	_____	() _____
_____	_____	_____	() _____

Catalog Year: _____ **Total credit Hours (minimum 30)** _____

Student's Signature: _____ Date: _____
 Advisor's Signature: _____ Date: _____
 Graduate Director's Signature: _____ Date: _____
 Graduate College: _____ Date: _____