DALLAS INTERNATIONAL UNIVERSITY

Intended Plan of Study MA(AS)—Abrahamic Worldviews Concentration

(To be submitted before the last class day of the first term the student is enrolled as a **GRADUATE STUDENT**)

_____

Name (Last, First Middle)

_____

Permanent Street Address City, State ZIP Phone Number

Master of Arts in Abrahamic Studies – Abrahamic Worldviews Concentration _____

Degree Option: o Thesis option o Non-thesis option Expected Degree Completion Date

Prerequisite requirements, students must complete the following: AC4315 Old Testament Survey; and AC4316 New Testament Survey ***Students may petition to waive these prerequisite requirements it they have taken equivalent courses elsewhere. Courses are evaluated on a course-by-course basis.*

Transfer Credit: Transfer credit will not be granted for course work done more than 10 years before initial enrollment in Dallas Int'l. In order to receive transfer credit, you must submit a ***Petition Form***, with all the necessary signatures, to the Dean of Academic Affairs. Those courses should be listed below along with courses to be taken at Dallas Int'l toward your degree. No more than 15 semester hours of transfer credit will be granted toward a degree.

List only the courses required for your degree. Include transfer credit granted on your *Petition Form(s).*

Date of *Catalog* when plan of study submitted: _____ ***(Term and Year)***

Abrahamic Studies General Core Requirements (15 hours)		**No. of credits**	**Term and Year**
Abrahamic Language (6 cr)	AC5341 Arabic 1 **OR** AL5321 NT Greek 1 **OR** AL5326 Hebrew 1		
	AC5342 Arabic 2 **OR** AL5322 NT Greek 2 **OR** AL5327 Hebrew 2		
	AC5243 Arabic 3		
Department approved courses (9 cr)			
Concentration in Abrahamic Worldviews core courses (15 hours) *Five approved courses in Abrahamic studies*			
Thesis option (6 hours)	Thesis (6 cr)		
Non-thesis option (6 hours + comps)	Elective 1 (3 cr)		
	Elective 2 (3 cr)		
		Total Cr Hours 36	

_____ _____

Signature of 1st Supervising Committee Head Date Signature of 2nd Supervising Committee Member Date

_____ _____

Signature of 3rd Supervising Committee Member Date Signature of 4th Supervising Committee Member Date

Authorization of Study Plan

_____ _____

Signature of Student Date Signature of Graduate Advisor Date

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Signature of International Student Coordinator Date
(If International Student)

_____ _____

Signature of Department Head Date Signature of Dean of Academic Affairs Date