Austin Peay State University
Department of Communication
Application for Admission to Candidacy and Program of Study Form
For the M. A. in Communication Arts, Corporate Communication Specialization

Student's Name: _____ Student's Number: A _____

Mailing Street Address: _____ City: _____ State: _____ Zip Code: _____

Best Contact Phone Number: (_____) _____ - _____ Email Address: _____

Use of This Application Form for: ☐ **Initial Application** ☐ **Updating Application**

Fulfillment of Research Component by: ☐ **Research Paper (COMM 5950 – 3)** ☐ **Thesis (COMM 599A, B – 3, 3)**

1. Corporate Communication Core, Required Courses (13):

Prefix	Number	Title	Credit	Approved*
COMM	5001	Proseminar in Communication	1	
COMM	5000	Communication Research Methods	3	
COMM	5030	Applied Communication Research	3	
COMM	5600	Integrated Corporate Communication	3	
COMM	5650	Communication Law	3	

2. Corporate Communication Research Component (either 3 or 6):

Prefix	Number	Title	Credit	Approved*
COMM	5950	Research Project (Paper) **OR**	3	
COMM	599A	Thesis Writing **AND**	3	
COMM	599B	Thesis Writing	3	

3. Corporate Communication Elective Courses (15 or 18 depending upon Research Component Choice):

Students in the Research Paper option for 3 credits take 18 semester hours of elective classes while students in the Thesis option for 6 credits take only 15 semester hours of elective courses. Only COMM courses numbered 5000 or above count as graduate credit toward the M. A. in Communication Arts, Corp. Communication.

Prefixes	Credit	Approved*	Prefixes	Credit	Approved*
COMM	3		COMM	3	
COMM	3		COMM	3	
COMM	3				
COMM	3				

*Transfer of courses from an accredited college or university is limited to 9 semester hours and is determined by the Graduate Coordinator on a course by course evaluation of the of classes that are comparable to and compatible with existing graduate classes currently offered in the M. A. program in Communication Arts in the Corporate Communication specialization. *Classes must be initialed as approved by the advisor/committee chair for each student.*

4. Application Form Approval by Advisor/Committee Chair

Advisor Printed Name	Advisor Signature	Signature Date

5. For Thesis Only: List the names of two other graduate or associate graduate faculty members to serve on the committee.

Graduate or Associate Graduate Faculty Name	Graduate or Associate Graduate Faculty Name

6. Approval of the Graduate Coordinator

Graduate Coordinator Printed Name	Graduate Coordinator Signature	Signature Date