

INSTITUTE OF INTERDISCIPLINARY STUDIES

Sonoma State University
Rohnert Park, California 94928

**APPLICATION TO INTERDISCIPLINARY STUDIES (ITDS)
MASTER OF ARTS OR MASTER OF SCIENCES**

- SUBMIT THIS APPLICATION
- ALL COLLEGE TRANSCRIPTS
- TWO LETTERS OF RECOMMENDATION
- ELECTRONIC SUBMISSION IS PREFERRED

TO:

ELLEN CARLTON (ellen.carlton@sonoma.edu)
ITDS COORDINATOR
SONOMA STATE UNIVERSITY,
1801 E. COTATI AVE
ROHNERT PARK, CA 94928

Name _____ Telephone _____
Address _____ City/Zip _____

E-mail address _____

Proposed Area of study through the ITDS Program:

I. ACADEMIC INFORMATION

A. Colleges attended

Name	From/to	Major	Degree/Year

B. Overall GPA _____

C. Grade point average for last 60 units _____(attach copy of all transcripts)

D. Honors and Achievements

E. References: supply the names of two persons whose letters of recommendation you have included in this application

1. _____
Name Title or profession

Address

2. _____
Name Title or profession

Address

