

Women's Studies & Gender Studies



Preparing people to lead extraordinary lives

APPLICATION FOR A CONCENTRATION IN WOMEN'S STUDIES AND GENDER STUDIES

Name: _____ Date: _____

Student ID Number: _____

Local Address: _____ phone: _____

_____ e-mail: _____

Permanent Address: _____

Department or Program at Loyola: _____

Major Field: _____ Advisor: _____

Anticipated date of graduation: _____

Courses completed for a Concentration in WSGS (with a grade of C or better)

Course DEPT-number	Course Title & Instructor	Semester and Year
1. WSGS 401 <i>or</i> WSGS 402 (required)		
2.		
3.		

Signature: _____

Name: _____

Graduate Program Director: _____

Signature: _____ Date: _____