Dual Degree Form

Students may complete the requirements for a second simultaneous degree while registered in the same faculty upon approval of the Faculty concerned (two different degree structure) or another faculty at AUB. In such a case, a student will be granted two separate degrees at graduation. If tuition differs, students will pay the higher of the tuitions.

All final admissions decisions depend on the overall quality of the eligible applicant pool and the number of available places in the faculty concerned for the semester in question. The applications are treated in terms of grade requirements similar to transfer applications across faculties/schools.

General Information

Students may apply for a dual degree after the completion of at least two regular semesters in the initial program.

1. Students may apply for a dual degree after the completion of at least two regular semesters in the initial program.

2. Students must be in good academic standing to apply for a dual degree. Good academic standing means that the student is not on probation. (Refer to AUB UG catalogue for additional requirements.)

3. Dual degree application deadline is May 30 for the fall term, and December 1 for the spring term.

4. Students wishing to withdraw from a dual degree must do so in writing to the Registrar’s Office and faculty concerned.

5. Applications must be submitted to the Faculty Dean’s Office/Student Section offering the program of the dual degree.

6. Students will receive a separate diploma for each degree program they complete at graduation.

ID number: __________________ E-mail: __________________ Mobile: __________________
Last name: __________________________ First name: __________________________
Current major: __________________________ Faculty: __________________________
Dual degree major: __________________________ Faculty: __________________________
Academic standing: ______ Overall average: __________ Credits earned: __________
To start □ Fall □ Spring Semester of the academic year: ________ / ______
Signature of Student: __________________________ Date: __________________________
Name of adviser in current major: ___________ Signature of adviser in current major: ___________
Recommendation of chairperson/coordinator dept. of dual degree major: ________________________________

Name of dual degree academic adviser: ________________________________________________________

Signature of chairperson/coordinator: ___________________________ Date: ________________________

Faculty/School Decision  Dual degree major ________________  ☐ Approved  ☐ Rejected

Comments: ______________________________________________________________________________

Signature: ___________________________ Date: ________________________

To be filled by the Registrar’s Office only

Received by: ___________________________ Date: ________________________
Implemented by: ___________________________ Date: ________________________
Referred to: ___________________________ Date: ________________________