



Joint Degree Program Registration

Name: _____ Student ID #: _____

I wish to enter the following Joint Degree Program (check one):

JD/MBA (Business Administration)

JD/MPA (Public Administration)

JD/LLM (Master of Laws)

JD/PharmD (Pharmacy)

JD/MSW (Social Work - U of I)

JD/MA (Political Science - ISU)

JD/MS (Agricultural Economics - ISU)

JD/MHA (Health Administration - DMU)

JD/MPH (Public Health – DMU)

Expected JD graduation date: _____

Expected Joint degree graduation date: _____

I have read the Drake University Law School Guidelines and Policies for Joint Degree Programs as stated in the Student Handbook.

Student signature: _____ Date: _____

Joint Degree Advisor: _____ Date: _____
(Professor Jeremy Kidd)

Please submit this completed form to Kris Magill in the Dean's Suite.