



**Westfield State University**  
**College of Graduate and Continuing Education**  
**MPA program Early Entry Advisor Approval Form**

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_ Email: \_\_\_\_\_

Undergraduate Major: \_\_\_\_\_ Graduation year: \_\_\_\_\_

Proposed MPA courses to take as part of Undergraduate Study: (to be completed by the MPA Program director)

Term: Fall \_\_\_\_\_ Course Title: PADM 0600: Foundation of Public Administration

Term: Spring \_\_\_\_\_ Course Title: \_\_\_\_\_

How the above course(s) would be applied to the Undergraduate Program of Study: (to be completed by the Day School Advisor with the student)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Day School Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MPA Program Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_