

Doctoral Program of Study and Advisory Committee Form

Name: _____ Panther ID _____

Email _____ Telephone _____

PROGRAM OF STUDY FOR DOCTORAL STUDENTS AFTER FALL 2012

Please see program descriptions in the *graduate catalog* for number of hours required in each area—minimum hours required vary by major.

CORE (min. of 18 semester hrs.) <small>Some majors require EPRS 8500 and 8530- see catalog</small>				MAJOR (min. of 18 semester hrs. <small>Some majors require additional hours – see catalog</small>)				COGNATE <small>See Graduate Catalog for requirements.</small>			
Prefix & Number	Hours	Term	Grade	Prefix & Number	Hours	Term	Grade	Prefix & Number	Hours	Term	Grade
EPRS 8500 or 8530	3				3				3		
EPRS _____	3				3				3		
EPRS _____	3										
Two Advanced Research Methods Courses					3				3		
_____	6										
EPY _____ or EPSF _____	3				3				3		
					3				3		
					3				3		
<u>DISSERTATION:</u> 15 Hours											
_____ 9990	15										

NOTE: (1) No coursework that has been completed more than 7 yrs prior to admission to candidacy may be used to meet degree requirements. (2) All transfer credit listed on program of study (i.e., credits from other institutions, non-degree, Ed.S., Ph.D.) must be indicated with an asterisk. Please attach a copy of the transcript, excluding GSU, showing coursework taken. A minimum of 24 sem. hrs. must be earned in the doctoral program at GSU; the 24 hr. minimum may not include transfer credits from other institutions, another doctoral program, a specialist program, or the non-degree status. The use of non-degree credits is limited to a maximum of 9 sem. hrs. and is included in the hours allowed in transfer. **DEADLINE FOR ADMISSION TO CANDIDACY IS _____ (GSS use only)**

DOCTORAL ADVISORY COMMITTEE

_____ Initial Advisory Committee

APPROVALS

_____ Revised Advisory Committee

Student Signature _____	Date _____	
Major Advisor/ Committee Chair _____	Dept. _____	Signature _____ Date _____
Committee Member _____	Dept. _____	Signature _____ Date _____
Committee Member _____	Dept. _____	Signature _____ Date _____
Committee Member _____	Dept. _____	Signature _____ Date _____
Department Chair _____	Dept. _____	Signature _____ Date _____

AFTER all signatures of above are obtained, submit form to the Office of Graduate Student Services (GSS), Suite 300 College of Education & Human Development.

Monitored by GSS:	Date:	Associate Dean for Graduate Studies:	Date:
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