

Graduate Degree Plan

The graduate advisor, in consultation with the student, will complete this form after all undergraduate deficiencies have been addressed, required standardized tests have been completed, and the student has earned no more than 18 hours of graduate credit in the degree program. This form will be submitted to the Department Chair and, after approval, a copy will be sent to the program coordinator, the student, and the Office of Academic Administration. Candidates for graduate degrees must complete the program's required comprehensive exams or equivalent before graduation. An advisor should not complete a Graduate Degree Plan form while the student is on probation or has a GPA of less than 3.00.

STUDENT NAME:		STUDENT ID:				
CANDIDATE FOR:	MS MPH	PhD	Other (please ind	icate):		
MAJOR or PROGRAM	1:					
REQUIRED ADDITION	NAL COURSES:					
List courses completed and requirements of the General						
MAJOR	a Academic Catalog and	u arry Scrioor	Catalog/Bulletill Holli	willon the stude	in interios to gradu	al e .
	Title		Credit	Completed		
Course #			Hours	Where*	Term/Year**	Grade
*UTHSCT course or Trai	nsfer courses (not to ex					
**Must be within 6 years	of graduation date.	•	TOTAL		AVERAGE	
Advisor Signature		Date	Student Signate	Student Signature Date		
Department Chair Signature		Date	Office of Acade	Office of Academic Administration Da		