



# College of Education

## Doctoral Program of Study and Advisory Committee Form

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_

Panther# \_\_\_\_\_  
 Day Telephone \_\_\_\_\_  
 Evening Telephone \_\_\_\_\_

To complete this document, refer to the "Policies Governing the Doctor of Philosophy Degree" section and appropriate departmental section of the *Graduate Bulletin*.

### PROGRAM OF STUDY FOR CANDIDATES ENTERING FALL 2007 AND LATER

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

CORE (min. of 27 semester hrs.)				MAJOR (min. of 18 semester hrs.)				COGNATE (min. of 18 semester hrs.)			
Prefix & Number	Hours	Term	Grade	Prefix & Number	Hours	Term	Grade	Prefix & Number	Hours	Term	Grade
EPRS 8500	3				3				3		
EPRS 8530	3				3				3		
	3				3				3		
	3				3				3		
EPSF	3				3				3		
EPY	3				3				3		
9990	9										

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, EdS, PhD) must be indicated with an asterisk. Please attach a copy of the transcript, excluding GSU, showing coursework taken. A minimum of 36 sem. hrs. must be earned in the doctoral program at GSU; the 36 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 \_\_\_\_\_ (OAA use only)

### DOCTORAL ADVISORY COMMITTEE

\_\_\_\_\_ Initial Advisory Committee

APPROVALS

\_\_\_\_\_ Revised Advisory Committee

Student Signature _____	Date _____	Panther # _____
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 Academic Assistance & Graduate Admissions (OAA), Room 300 College of Education.

Monitored by OAA: _____	Date _____
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