WKU GRADUATE SCHOOL

Program of Study

Name _____ _____ _____ WKU ID # _____

Last   First   M/M

Degree Type (e.g. MA, MS, MAE, etc): _____ Degree Major: _____

Concentration (if applicable): _____ Estimated Term of Degree Completion: _____

Core and Elective Courses

Course Number	HRS	TR	Transfer Institution	GSR Use	Course Number	HRS	TR	Transfer Institution	GSR Use
					Deficiencies				
					Course Number	**HRS**			

Any courses listed as deficiencies will not be included in the degree GPA, but will be included in the overall graduate GPA.

For all education programs:

Undergraduate Degree Institution: _____ Date _____ GPA prior to admission _____

Graduate Degree Institution: _____ Date _____ Hours prior to admission _____

Certification(s) Held: _____ Certification Pursued: _____

_____ _____
Student Signature   Date

_____ _____
Advisor Signature   Date

_____ _____
Graduate School Officer Signature   Date

_____ _____
Certification Officer Signature (if applicable)   Date

_____ _____
Doctoral Program Officer Signature (if applicable)   Date

Students listing a 599, 699, or 799 course on the Program of Study must submit Committee & Topic Selection prior to enrollment in the course.

Graduate School Use Only

☐ Admitted in Good Standing   ☐ JUMP   Major Code _____   Conc. Code _____   Total Hours _____

All graduate program requirements must be completed within 6 years of initial enrollment; doctoral degrees must be completed within ten years of initial enrollment.
**Masters degree programs may not count more than 12 hours of 400G coursework; specialist and doctoral degrees may not include any 400G coursework.*

August 2014

1906 College Heights Blvd. #11010 | Bowling Green, KY 42101-1010 | Phone: 270-745-2446 | Fax: 270-745-6950 | graduate.records@wku.edu

Students may submit Committee and Topic Selection along with the Program of Study
<u>*OR*</u>
Students listing a 599, 699, or 799 course on the Program of Study must submit
Committee & Topic Selection prior to enrollment in the course.

Name _____ _____ _____   WKU ID # _____
                 Last   First   M/M

Degree: _____   Concentration (if applicable): _____

Topic of Study:

_____   _____   _____
Committee Chair Signature   Date   Name (Please print or type)

_____   _____   _____
Committee Member Signature   Date   Name (Please print or type)

_____   _____   _____
Committee Member Signature   Date   Name (Please print or type)

_____   _____   _____
Committee Member Signature (optional)   Date   Name (Please print or type)

_____   _____   _____
Committee Member Signature (optional)   Date   Name (Please print or type)

_____   _____   _____
Committee Member Signature (optional)   Date   Name (Please print or type)

_____   _____
Doctoral Studies Officer Signature (if applicable)   Date

_____   _____
Graduate School Officer Signature   Date