## UNIVERSITY OF MARYLAND College of Education

## DOCTORAL PROGRAM

Approval Sheet

Submit one copy of the approval sheet stapled to one copy of the DOCTORAL PROGRAM . After departmental review and approval, submit all forms to the Graduate Studies College Office.

Concentration

Advisor

Effective September 1, 1992 doctoral students admitted fall 1992 and thereafter must file an approv ed Doctoral Program form with the College Office prior to completion of the 21st postmasters credit hour. Students failing to do so will not be permitted to register.

Advisor's Signature

Department Graduate Director's Signature

Associate Dean's Signature

(Reminder, all candidates must be advanced within 5 years of the original admiss ion date)

Date

Date

Date

## College of Education

## DOCTORAL PROGRAM

Name	UID
Department	Advi sor

Department \_\_\_\_\_

List all courses you plan to take toward the requirements for the degree being sought. Include coursework completed, coursework in progress, and any proposed coursework. Any coursework applied to the program taken outside of UM should also be listed with the name of the institution where the course was taken. You may access your unofficial transcript at http://www.testudo.umd.edu

Please list coursework in CHRONOLOGICAL ORDER.

=======	=====	======================================		
SEMESTER	YEAR	COURSE PREFIX, NUMBER, and TITLE	OF CREDI	
			GRADE & N	NO. TOTAL