

Т	#		

\_\_\_\_\_ Degree: \_\_\_\_\_

Name: \_\_\_\_\_

Major: \_\_\_\_\_

Concentration:

	Course Subject	Course Number	Course Description		Where Taken	Term Completed	Sem. Hrs. Credit	Grade
BACKGROUND								
COURSES								
CREDIT NOT COUNTED								
TOWARD DEGREE								
TRANSFER								
CREDIT								
COURSES TAKEN								
DR								
TO BE TAKEN							1	
AT TTU TO COUNT FOWARD DEGREE								
OWARD DEGREE								
			Total Semester Hours C	redit to be	Counted I			
						F	NAL GPA	
Do you anticipa If yes, IRB appr	te using H oval is req	uman Subjec uired one sei	ts in your research? YES_ mester prior to graduation.	NO Contact you	ur advisor	for more info	mation.	
Total semester hou	ırs includina	thesis:						
7000 level60	00 level	_5000 level			6 ye	ars expires end		
APPROVED ADVISO	RY COMMITT	EE:					(term)	(year)
		Chairpers	son Date					
		Member	Date	Departme	ntal Chairperso	on		Date
		Member	Date	Dean of C	ollege			Date

## ALL SIGNATURES VERIFY APPROVAL OF TOTAL FORM

NOTE: A graduate student shall be enrolled in at least one course appropriate to the degree objective during the term in which the degree is awarded.

NOTE: This is an internal department form - the COGS utilizes Degree Works for Degree Verification. Departments do not need to provide this form to COGS. Departments will complete the Appointment of Advisory Committee Form (DocuSign) as linked on the COGS website online forms page.