

Tennessee Technological University

M.A./M.Ed./M.S.

PROPOSED PROGRAM OF STUDY

Student ID / T No. _____

Name _____ Major _____ Proposed Degree _____

	Course Number	Course Description	Where Taken	Date Completed	Sem. Hrs. Credit	Grade
BACKGROUND COURSES Credit not Counted Toward Degree						
TRANSFER CREDIT						
COURSES TAKEN OR TO BE TAKEN at TTU to Count Toward Degree						
<p>Do you anticipate using Human Subjects in your research? YES ___ NO ___ If yes, IRB approval is required one semester prior to graduation. Contact your advisor for more information.</p>						
TOTAL Semester Hours Credit to be Counted Toward Degree						

Total semester hours including thesis:
 7000 level ___ 6000 level ___ 5000 level ___

APPROVED ADVISORY COMMITTEE:

 Chairperson _____ date

 Member _____ date

 Member _____ date

 Member _____ date

 Member _____ date

 Departmental Chairperson _____ date

 Dean of College _____ date

 Office of Graduate Studies _____ date

ALL SIGNATURES VERIFY APPROVAL OF TOTAL FORM

**APPLICATION FOR ADMISSION TO CANDIDACY
AND APPOINTMENT OF ADVISORY COMMITTEE**

I certify that I have satisfactorily completed nine semester hours of graduate work and hereby apply for admission to candidacy and request that the following members of the Graduate Faculty serve on my Graduate Advisory Committee.

CANDIDACY:

Major Subject _____

Date Admitted to Full Standing _____

Graduate Credits Completed at Tenn. Tech. _____ Other Universities _____

Graduate Quality Point Average at Tenn. Tech. _____ Other Universities _____

GRE General Test Score: Verbal _____ Quantitative _____ Analytical _____

Miller Analogies Test Score: Raw Score _____ Percentile _____

ADVISORY COMMITTEE: (please type or print)

_____, Chairperson

_____, Member

_____, Member

_____, Member

_____, Member

Student's Signature _____

Student ID / T No. _____

Address _____
Street

City, State, Zip

EMAIL ADDRESS: _____