



NURSING POST MASTER'S CERTIFICATE - FAMILY NURSE PRACTITIONER (FNP)

PROPOSED PROGRAM OF STUDY
HANDWRITTEN FORMS WILL NOT BE ACCEPTED

T No. _____

Name _____

	Course Number	Course Description	Where Taken	Term Completed	Sem. Hrs. Credit	Grade
Required Background Courses	NURS 6102	Advanced Health Assessment Clinical			1	
	NURS 6101	Advanced Health Assessment			3	
	NURS 6103	Advanced Pathophysiology			3	
	NURS 6104	Advanced Pharmacology			3	
NURSING REQUIRED COURSES	NURS 6601	Family Nurse Practitioner I			3	
	NURS 6602	Family Nurse Practitioner I- Clinical (120 hours)			2	
	NURS 6603	Family Nurse Practitioner II			3	
	NURS 6604	Family Nurse Practitioner II - Clinical (240 hours)			4	
	NURS 6605	Family Nurse Practitioner III			3	
	NURS 6606	Family Nurse Practitioner III - Clinical (120 hours)			2	
	NURS 6609	Family Nurse Practitioner Practicum (240 hours)			4	
		Total Contact Hours In:				
		Family NP Clinical/Practicum = 720				
TOTAL Semester Hours Credit to be Counted Toward Certificate					21	

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.

FINAL GPA _____

Graduate Nursing Program Coordinator

Date

Dean School of Nursing

Date

College of Graduate Studies Designee

Date

ALL SIGNATURES VERIFY APPROVAL OF TOTAL FORM

NOTICE:

1. A graduate student shall be enrolled for at least one course appropriate to the degree objective during the term in which the degree is awarded.
2. Application for graduation must be submitted by deadline published in catalog and the online Academic Calendar.