

# NORTH CAROLINA STATE UNIVERSITY

THE GRADUATE SCHOOL

## DOCTORAL PLAN OF GRADUATE WORK

Date \_\_\_\_\_

For \_\_\_\_\_  
Last Name First Middle Student Identification Number

Degree Sought \_\_\_\_\_ Date Expected \_\_\_\_\_  
Month Year

School \_\_\_\_\_

Major \_\_\_\_\_ Minor(s) \_\_\_\_\_

Modern Language (if required) \_\_\_\_\_

Subject of Dissertation \_\_\_\_\_

Approved for the Department by \_\_\_\_\_

### Advisory Committee

\_\_\_\_\_  
Typed Full Name Initials Signature (Chair)

\_\_\_\_\_  
Typed Full Name Signature (Co-Chair, if any)

\_\_\_\_\_  
Typed Full Name Signature (Minor Representative)

\_\_\_\_\_  
Typed Full Name Signature (Member)

\_\_\_\_\_  
Typed Full Name Signature (Member)

\_\_\_\_\_  
Typed Full Name Signature (Member)

\_\_\_\_\_  
Typed Full Name Signature (Member)

\_\_\_\_\_  
Graduate School Representative (appointed by the Graduate School)

\_\_\_\_\_  
Signature (Student)

**Approved** \_\_\_\_\_  
Graduate School

Doctoral students' plans should be filed in the department/program graduate office and submitted to the Graduate School either via GARS or on hard copy after 12 hours of course work in the contemplated program have been completed.

(OVER)



# GRADUATE WORK PROPOSED

Course Prefix and Title

Credits    Term

Grade

## MAJOR COURSES


## MINOR COURSES
