



DOCTORAL PROGRAM OF STUDY

Doctor of Education

College of Education and Human Services

NAME _____ DATE _____

STUDENT ID NUMBER _____

MAJOR _____

AREA OF EMPHASIS _____

COMMITTEE CHAIR _____

MAILING ADDRESS:

Street _____

City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

E-mail Address _____

Major Area

Institution (University)	Course Number	Course Title	Grade	Semester Hours
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Unspecified Elective – to be determined in collaboration with chair – Program 3 hrs. Coordinator must be advised of the choice prior to qualifying assessment
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Hours taken from Master's Degree _____

Hours taken after admission to MU Doctoral Program (minimum 18): _____

Total hours in Major (minimum 33)
(Including unspecified elective, not including dissertation hours): _____

*Indicates course(s) taken from Master's Degree

Area of Emphasis

Institution (University)	Course Number	Course Title	Grade	Semester Hours
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Total hours in Area of Emphasis
(minimum 9, must be after admission to the doctoral program): _____

Rationale for courses in the Area of Emphasis:

Research and Support Courses

Institution (University)	Course Number	Course Title	Grade	Semester Hours
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Total hours in the Research and Support Area (minimum 21 hours): _____

*Indicates course(s) taken in Master's Degree

TOTALS

- 1) Total hours in the **Major** (minimum 33): _____
- 2) Total hours in the **Area of Emphasis** (minimum 9): _____
- 3) Total hours in **Research and Support** (minimum 21): _____
- 4) Total hours (minimum 63): _____
 (not including dissertation research hours - this will be the sum of lines 1, 2, & 3)
- 5) Grand total of hours, including the dissertation (minimum 75): _____
 (total of line 4 & twelve hours of LS 797 or CI 797 Dissertation Research)
- 6) Total hours beyond Master's (minimum 45): _____
- 7) Total hours taken at MU (minimum 60): _____

Note: Dissertation hours are included only on lines 5, 6 and 7

Projected Date of Qualifying Assessment (for planning purposes only): _____

Typed Name	Signature	Date
_____ (Student)	_____	_____
_____ (Committee Chairperson- major area)	_____	_____
_____ (Committee Member – major area)	_____	_____
_____ (Committee Member – area of emphasis)	_____	_____
_____ (Committee Member - optional)	_____	_____
_____ (External Committee Member)	_____	_____
_____ (Program Director)	_____	_____
<u>Teresa Eagle</u> (Doctoral Coordinator)	_____	_____
<u>Ronald Childress</u> (GSEPD Dean)	_____	_____