



GRADUATE STUDENT

COURSE SEQUENCE PLAN

Entered

Revised: 07/2013

Date _____ E-mail _____ Name _____ Program _____
 UMID# _____ Phone # _____ Address _____
 _____ City _____ State _____ Zip _____
 Grant _____ Identifier _____

 Faculty Advisor Signature

 Student Signature

TO THE STUDENT: IMPORTANT. READ THE FOLLOWING AND SIGN WHERE INDICATED ABOVE, WHICH WILL ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTAND ITEMS 1 THROUGH 6 LISTED BELOW:

1. The Graduate Course Sequence Plan must be filed in the Associate Dean's Office (Orovitz 311) by the end of the first semester of enrollment for master's students, and by the end of the second semester for doctoral students.
2. Indicate the year, term and credits for each course in which you are to enroll.
3. Include all courses that you are required to take or this form will be returned to you to complete.
4. A Change of Sequence of Study form must be completed to change this course sequence once it has been approved by your advisor.
5. A Course Substitution form must be on file for all course substitutions.
6. Courses are subject to availability and time/semester offered is subject to change.

YEAR _____	FALL	
COURSE	CR.	GR.

YEAR _____	SPRING	
COURSE	CR.	GR.

YEAR _____	SUMMER I	
COURSE	CR.	GR.

YEAR _____	SUMMER II	
COURSE	CR.	GR.

YEAR _____	FALL	
COURSE	CR.	GR.

YEAR _____	SPRING	
COURSE	CR.	GR.

YEAR _____	SUMMER I	
COURSE	CR.	GR.

YEAR _____	SUMMER II	
COURSE	CR.	GR.

YEAR _____	FALL	
COURSE	CR.	GR.

YEAR _____	SPRING	
COURSE	CR.	GR.

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COURSE	CR.	GR.

YEAR _____	FALL	
COURSE	CR.	GR.

YEAR _____	SPRING	
COURSE	CR.	GR.

YEAR _____	SUMMER I	
COURSE	CR.	GR.

YEAR _____	SUMMER II	
COURSE	CR.	GR.