# UNIVERSITY OF MARYLAND College of Education

#### **DOCTORAL PROGRAM**

#### **Approval Sheet**

Submit one copy of the approval sheet stapled to one copy of the DOCTORAL PROGRAM . After departmental review and approval, submit all forms to the Graduate Studies College Office.

Concentration	Advisor			
	dmitted fall 1992 and thereafter must file an approv ed Doctora appletion of the 21st postmasters credit hour. Students failing to do			
Advisor's Signature	 Date			
Department Graduate Director's Signature	 Date			

pad (12/05)

### College of Education

## DOCTORAL PROGRAM

Name	UID				
Department	Advi sor				
List all courses you plan to take toward the requirements for the degree being sought. Include coursework completed, coursework in progress, and any proposed coursework. Any coursework applied to the program taken outside of UM should also be listed with the name of the institution where the course was taken. You may access your unofficial transcript at <a href="http://www.testudo.umd.edu">http://www.testudo.umd.edu</a>					
Please list coursework in CHRONOLOGICAL ORDER.	CDADE & NO. TOTAL				
SEMESTER YEAR COURSE PREFIX, NUMBER, and TITLE	OF CREDITS CREDITS				
completed, coursework in progress, and any proposed coursework. Any coutside of UM should also be listed with the name of the institution where to You may access your unofficial transcript at <a href="http://www.testudo.umd.edu">http://www.testudo.umd.edu</a> Please list coursework in CHRONOLOGICAL ORDER.	oursework applied to the program taken the course was taken.  GRADE & NO. TOTAL				