

Program of Study Template

This program of study template is intended to help you plan your graduate career. We recommend that the Program of Study be completed in consultation with your advisor within the first semester of your graduate career.

This is not a substitute for the Graduate Catalog. **All students are still required to meet catalog requirements in order to graduate. If your program of study will deviate from catalog requirements, you must submit any necessary [substitutions and waivers](#) to The Graduate School.**

Student Name _____ Student ID _____

Dukes email _____ Degree _____

Program/Concentration _____

Anticipated Graduation Date _____ Advisor Name _____

Transfer Credit

List any courses you have discussed transferring with your program director or advisor. This includes both coursework taken at another institution or at JMU while an undergraduate or continuing education student (Please refer to Transfer Credit policies.) In order to have coursework transfer, an [Approval of Transfer Credit form](#) and any necessary transcripts must be submitted to The Graduate School as soon as possible.

Institution	Course Number and Title	Credit Hours	Year/Semester Completed	Grade

Planned Course Sequences

This section is to allow you to list any courses that must be taken in a specific order that you must progress through.

Program of Study

We recommend that you have your catalog of record open to your program requirements while filling in this section. Fill in courses as appropriate for each semester. If more space is needed for classes, right click in the last row of course boxes, go to insert, and insert a row below. **Students should consider how prerequisites and co-requisites will impact their course sequence. Students should also verify with their advisor when courses will be offered by the program.** If you have the option to choose an elective from a group of courses and are not certain which specific courses you would like to take, you may write in the name of the group of courses instead (e.g. Concentration Elective).

Semester 1 Term:		Year:
Course Number	Required Credit Hours	Notes: (i.e. Required prerequisites or co-requisites; when this course is offered, you need to earn a specific grade in this course, etc.)
Total Credits:		

Semester 2 Term:		Year:
Course Number	Required Credit Hours	Notes: (i.e. Required prerequisites or co-requisites; when this course is offered, you need to earn a specific grade in this course, etc.)
Total Credits:		

Semester 3 Term:		Year:
Course Number	Required Credit Hours	Notes: (i.e. Required prerequisites or co-requisites; when this course is offered, you need to earn a specific grade in this course, etc.)
Total Credits:		

For more semesters, copy and paste above table as needed.

Total Earned Credits for all Semesters (including approved transfer credit):

Total Credits Required for the Degree According to Your Catalog of Record:

At least half my credits are 600 level courses or above, per Graduate School policy.

Other Graduation Requirements

What type of Comprehensive Assessment is required for your program (e.g. an exam, a portfolio, orals, a paper, etc.)? All students are required to have a **Comprehensive Assessment Results Form** on file with *The Graduate School* documenting that they have successfully completed the assessment. This is true even if your scholarly document serves as your comprehensive assessment. _____

Tentative Comprehensive Assessment Date (month/year) _____

Is a scholarly document required for this program?

Thesis Dissertation Research Project Clinical Research Project None

Signatures

Student's Signature _____

Date _____

Advisor's Signature _____

Date _____