

### ***Doctoral Degree Plan of Study and Supervisory Committee***

Student:

(Type Name)

Student ID:

(Signature)

Degree:

Program:

Option:

Expected Graduation Term:

Previous Degrees:

Degree:

Month/Year:

Institution:

Degree:

Month/Year:

Institution:

**NDSU Graduate Courses** Enter courses in the order in which you have taken (or plan to take) them. List the total number of research credits as one line item.\* Do not include courses from your master's Plan of Study.

Dept./Course #

Course Name

Credits

**Total:**

\* PLEASE NOTE: If a proposed graduate research project involves human or animal subjects, or biohazards, it must be submitted for review and approval by the Institutional Review Board (IRB), the Institutional Animal Care and Use Committee (IACUC), and/or the Institutional Biosafety Committee (IBC). The student should initiate this process after his or her supervisory committee has approved the final research design because IRB, IACUC, and IBC approval must be obtained before the research project commences.

## Transfer Credits

Official transcripts with grades posted from the transfer institutions must be on file in the Graduate School PRIOR to approval of the Plan of Study.

Include only transfer credits. Do not list the courses taken toward completion of a previously earned master's degree.

<u>Institution</u>	<u>Dept</u>	<u>Course #</u>	<u>Title</u>	<u>Term</u>	<u>Crs</u>	<u>Gr.</u>
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Total Transfer Credits:

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## Supervisory Committee

If a committee member **is not a full or affiliate member of the graduate faculty**, the approval of the Dean of the Graduate School is required. Please attach a recommendation from the program administrator accompanied by rationale and curriculum vitae. The Graduate School Representative must have **full graduate faculty status**.

*The supervisory committee approves the above listed courses and research to satisfy the doctoral degree requirements.*

<u>Typed Names</u>	<u>Signature (Recommends approval)</u>	<u>Department</u>
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Chair of Supervisory Committee

## Graduate School Representative

I hereby agree to serve as the Graduate School Representative on this committee. In accordance with Graduate College policies governing doctoral supervisory committees, I will ensure that Graduate College policies are followed, that the expectations for the student's performance are reasonable, and that the interactions between the student and the supervisory committee are conducted in a professional and equitable manner.

<u>Typed Name</u>	<u>Signature (Recommends Approval)</u>	<u>Department</u>
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## Approval

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Graduate Program Coordinator

601-689, 691:  
700-789, 791:  
800-889, 891:  
69x, 79x, 89x:  
Research:  
Transfer Credit:  
Total:

Graduate School Dean

Academic Support Specialist Review