

**Student Information**

Date: \_\_\_\_\_ Semester Admitted: \_\_\_\_\_  
 Student Name: \_\_\_\_\_ Coyote ID: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State, Zip: \_\_\_\_\_, \_\_\_\_\_ Email: \_\_\_\_\_

**A. Core Curriculum**

Study Plan	Units	Grade	Sem/Yr	Comments	Grade Verified
CD 5531	3				
CD 6614	3				
CD 6624	3				
CD 6648	3				
CD 6651	3				
CD 6659	3				
CD 6690	3				
CD 6640	3				

**B. Project**

Study Plan	Units	Grade	Sem/Yr	Comments	Grade Verified
CD 6964	4				

**C. Advanced Independent Study: CD 6952-6954 (2-4 units for a total of 4)**

Study Plan	Units	Grade	Sem/Yr	Comments	Grade Verified

**D. Electives: Six units of 5000-6000 level courses chosen in consultation with the Faculty Advisor**

Study Plan	Units	Grade	Sem/Yr	Comments	Grade Verified

**E. Upper Division Writing Requirement**

1. 3060 Course/Grade: \_\_\_\_\_ Sem/Yr \_\_\_\_\_  
 2. PSYC-6640 Grade: \_\_\_\_\_ Sem/Yr \_\_\_\_\_  
 3. WREE Score: \_\_\_\_\_ Date \_\_\_\_\_  
 For items 2 or 3 please attach documentation for proof of completion

**Ethical Violations**

Yes \_\_\_\_\_ No \_\_\_\_\_ Pending \_\_\_\_\_

ADVANCEMENT TO CANDIDACY RECOMMENDED: AFTER COMPLETION OF 12 UNITS AND NO ETHICAL VIOLATIONS.

Project Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Program Director Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_