

GRADUATE DEGREE PLAN



**STEPHEN F. AUSTIN
STATE UNIVERSITY**
JAMES I. PERKINS
COLLEGE OF EDUCATION

Student Name: _____

Campus ID (CID): _____

Date: _____

Candidate Degree for:_____

Catalog: _____

Major/Program: _____

Total Hours for Degree: _____

***Transfer Courses not to exceed 12 hours. Courses included must be taken within 6 years of graduation date.**

List courses required to be completed for the degree. **The distribution of courses must comply with the requirements of the Graduate Bulletin under which the student intends to graduate.** Any desired changes to a degree plan, which deviate from approved curriculum, must be pre-approved and include a “course substitution” form.

This form will be submitted to the Academic Unit Head and, after approval, will be emailed to coegrad@sfasu.edu for review and approval by the Dean. After final approval, the student will receive a final copy of their degree plan.

CORE COURSES

CORE RESEARCH

CONC/ELECTIVES

[illegible][illegible][illegible]

Notes:

***Student is responsible to submit a Graduation Application by required deadline. Degree will not be conferred without application.**

REQUIRED APPROVALS:

Program Coordinator

Date _____

Graduate Student (optional)

Date _____

Academic Unit Head

Date _____

Dean

Date _____