UNT Environmental Science Doctoral Degree Plan

(please type)

The Doctoral degree has an eight (8) year time limit; you must complete all requirements within 8 years, except in cases of an approved Leave of Absence. Graduate level courses will be valid for 10 years with no opportunity for appeal. Responsibility for reading the catalog requirements and for knowing when the program has been completed rests entirely with the student. Application for graduation must be filed in the office of the Toulouse School of Graduate Studies before the appropriate deadline date (see Graduate School calendar).

Name:				ID #:		
	(last)	(first)	(middle)			
(address)			(city)	(state)	(zip)	
(aaa. 555)			(city)	(ciaic)	(=-P)	
	AI	OMISSION, RESIDENC	Y AND DEFIC	IENCY DATA		
Dates:	Admission	First doctoral course	Do	octoral residency semes	ters	
Date (se	mester/year) by which	n degree must be completed_	G	raduation date/year		
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		(typed/printed nai	1 APPROVAL	(signat	uro)	
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Major Pr	rofessor					
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Committ	ee Member					
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Committ	ee Member					
Graduate	e Coordinator					
Departm	ent Chair					
Dean, G	raduate School					
Date Apr	proved					

	ID #:		
	(first)		
ist be on file in TG re requirements c	S. Indicate transfer courses by asterisks (*), list by prefourse hours which were taken in a master's program	ix, and number	er as they
Course Prefix & Number	Course Title	Semester Hours	Date
BIOL 5030	Foundations of Environmental Science		_Waived_
BIOL 5860	Biology Seminar	1	
	Statistics		
	from at least 3 of the distribution (thematic) groups – <u>list group a</u>	and courses belo	ow.
	st be on file in TG- re requirements co , and not included Course Prefix & Number BIOL 5030 BIOL 5860	urses by prefix, number and title. Indicate where transfer courses were tall state on file in TGS. Indicate transfer courses by asterisks (*), list by prefixe requirements course hours which were taken in a master's program of the "TOTAL" hours. Course Prefix & Course Title BIOL 5030 Foundations of Environmental Science BIOL 5860 Biology Seminar Statistics	urses by prefix, number and title. Indicate where transfer courses were taken. Official test be on file in TGS. Indicate transfer courses by asterisks (*), list by prefix, and number re requirements course hours which were taken in a master's program should not be a, and not included in the "TOTAL" hours. Course Prefix & Course Title Semester Hours

Dissertation:

Name:		ID #:			
(last)	(first)				
Are you choosing a PhD Concentration?	YES / NO				
If yes, which concentration?					
Courses listed on the above page that satisfy this conce	entration:				
				X	
				X	
				X	
				X	
				X	

DOCTORAL COMMITTEE FORM

DOCTOR OF PHILOSOPHY, ENVIRONMENTAL SCIENCE

Type the following information in the space provided. Ask your Major Professor and Committee Members to sign in the appropriate space. The completed form must be submitted to the Graduate Advisor by the time you file your Degree Plan.

Student:	Date:		
ID #:			
Matriculation date:			
Planned graduation date:			
Major Professor:			
Signed:			
Committee Member:			
Committee Member:			
Signed:			
Committee Member:			
Signed:			
Committee Member:			
Signed:			
Committee Member:			
Signed:			