**STUDENT INFORMATION**

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| **Student’s Name:** | **NAU ID:** |
| **E-mail Address:**      @nau.edu | **Phone Number:** |
| **Enrollment Term:**        (ex. Summer 2016) | **Expected Graduation:**       (ex. Spring 2019) |
| **Advisor:** | |
| **Total Required Credits for this Degree Program:** **32** | |
| **This is the:**  **Initial** (upon admission)  **Final** (submitted with Graduation Application) **Program of Study** | |

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Hours** | **Grade** | **T/E/P\*\*** |
| 1. **Required Courses (32 units required)** | | | | | | | | |
| * 1. **Formal Coursework (18 units required):** Select at least 18 units of formal coursework from the following courses: CHM 698, CHM 530, CHM 595, CHM 560, or 3-6 units of non-duplicating graduate level courses (500- or 600-level) chosen with your advisor’s and committee’s approval. | | | | | | | | |
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Student’s Name:       NAU ID:

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Hours** | **Grade** | **T/E/P\*\*** |
| * 1. **Research (14 units required):** Select at least 14 units from the following courses: CHM 685, CHM 699+, and CHM 697. | | | | | | | | |
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**Additional Requirements**

* Passing proficiency exams in three of the five subdisciplines of chemistry (see the Program Rules and Guidelines)
* Successful completion of a research thesis.

**Additional InFormation**

+ Please be aware that you may end up taking more than the 4-6 units you can count toward your degree because

you must enroll for CHM 699 each term while you work on your thesis.

In addition to all University and Graduate College policies, procedures, and requirements, graduate students must also adhere to the academic requirements, policies, procedures, and criteria outlined by their program’s Graduate Student Handbook.

**Students:**

You must secure official approval by your advisor and Department Chair/Director before submitting the final Program of Study.

By signing or entering your name below, you agree to the following statement:

*“Students are responsible for complete knowledge of Academic Catalog requirements in their degree plan for their catalog year and adhering to all policies in the Academic Catalog.”*

**Advisors and Chairs/Directors:**

Please indicate approval of the curriculum on the Program of Study by placing your signature (electronic signatures are permitted) in the space provided.

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| **Student:** | **Date:** |
| **Advisor:** | **Date:** |
| **Chair** (required for Final)**:** | **Date:** |

**\*\*Transfer/Equivalent/Previous Graduate Degree** – Must have Advisor approval

Transfer T = Course transferred from another university

Previous Graduate Degree P = Course taken at NAU from previous graduate degree

Equivalent E = Course taken at NAU in place of required course

Internal Transfer I = Graduate level course taken as undergraduate; Not applied to undergraduate degree