UNIVERSITY OF MARYLAND College of Education

DOCTORAL PROGRAM

Approval Sheet

Submit one copy of the approval sheet stapled to one copy of the DOCTORAL PROGRAM . After departmental review and approval, submit all forms to the Graduate Studies College O ffice.

Name	UID
DegreePh.DEd.D.	Department Program
Concentration	Advisor
Doctoral students must file an approved Doctoral P 21st postmasters credit hour. Students failing to do	
Advisor's Signature	 Date
Department Graduate Director's Signature	Date

(Reminder, all candidates must be advanced within 5 years of the original admission date)

UNIVERSITY OF MARYLAND College of Education

DOCTORAL PROGRAM

Name		UID _	UID		
Department			Advisor		
List all course completed, c outside of the taken. An off	es you pla oursewor Univers ficial trans	an to take toward the requirements for the degree being sork in progress, and any proposed coursework. Any course ity of Maryla and should also be listed with the name of the script must be on file at the University of Maryland for course University of Maryland unofficial transcript at http://www.te	ought. Include coursew work applied to the proge institution where the courses taken elsewhere.	ork gram taken	
Please list co	ursework	(in CHRONOLOGICAL ORDER.			
SEMESTER	YEAR		GRADE & NO. OF CREDITS == ==================================	TOTAL CREDITS ======	
'					
		• •			
		· 			
		·			
		-			
		·			