

## PSYD PROGRAM CHECKLIST

STUDENT NAME	<u> </u>		ID NO.				
	Last		First				
PROGRAM NAM	E						
DATE COMPLETED	REQUIREMENT						
1.		study (Policy 3.1)					
2	Program of study subr	mitted during 1st term (Policy purse on program of study (Policy	y 3.2.1). Submit olicy 2.2.2, item	required Permissi 2). Submit transfe	on to Take Und r credit request	ergraduate Course form , if applicable (Policy 3	m prior to reg
3	Doctoral committee es later than 60 days prio	stablished and appr <b>ioved</b> iting or to comprehensive exam (F	Policy 3.2.3):	S BEWJTPS	BDBEFN	IJD VOJU IFBE	ВОЕ (
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4	3 \$MJOJDBM 18	SPàDJFODZ &YBN		MJDJFT	ВОЕ	PHSBNT	
		er semester of 2ndagedevery semester credit hours of PS					RP (Policy
10. <u>Γ</u>	] "QQMZ GPS "	1" BQQSPWFE JO	UFSOTIJQ	OPU HSB	EVBUF QF	PMJDZ 4FFLàr	nì <sup>a</sup> ìÑ1
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