

## PROPOSED PLAN OF STUDY FOR ED.D.

The Graduate School • State University of West Georgia • Carrollton, Georgia 30118-4160

Name \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number \_\_\_\_\_ Major \_\_\_\_\_

### PROPOSED PLAN OF STUDY

Please list each course you intend to include in your degree program. A limited number of post-master's courses may be approved toward the Ed.D. degree. However, no post-master's courses taken prior to admission to the Ed.D. program should be listed without prior approval of the Director of the Ed.D. program. In the event of transfer courses, please identify each course by the institution from which credit was earned.

	DEPT. ABBR.	NO.	COURSE TITLE	*E/O	◇ GRADE	CREDIT
Core Courses		1				
			2			
			3			
			4			
			5			
			6			
			7			
			8			
			9			
			10			
			11			
			12			
			13			
			14			
			15			
Content Specialty		16				
			17			
			18			
Dissertation		19				
			20			

**SPACE BELOW FOR OFFICIAL USE**

\_\_\_\_\_  
Dissertation Chair

\_\_\_\_\_  
Director, Ed.D. in School Improvement

\_\_\_\_\_  
Dean of the Graduate School

\_\_\_\_\_  
Date Approved by Graduate Dean

You may not take more than \_\_\_\_ additional off-campus hours or transfer in \_\_\_\_ additional hours and apply them to this POS.

The signatures of your Dissertation Chair, Ed.D. Director and the Dean of the Graduate School in no way exempt you from any Graduate School policies. Any exemptions must be granted in writing under separate letter by the Dean of the Graduate School by someone who, by institutional or University System of Georgia structure, has authority over the Dean of the Graduate School.

**\*Graduate School use only**

◇ **If you have not completed course, please leave blank.**