



### INTERDISCIPLINARY NEUROSCIENCE PH.D. PROGRAM

An update of the student’s program of study, which includes graduate courses taken prior to admission and Non-Degree courses, and grades received. Also, an area of concentration, proposed date of exam, and dissertation title are included on this form. All committee members, the graduate coordinator, and the COS dean must approve the program of study as shown on **Form #3**.

#### PROGRAM OF STUDY

**STUDENT NAME:** \_\_\_\_\_ **G#** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Area of Concentration:** \_\_\_\_\_

**Proposed Date of Exam:** \_\_\_\_\_

**Dissertation Subject:** \_\_\_\_\_

#### Dissertation Committee

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Committee Chair & Affiliation \_\_\_\_\_

Member & Affiliation \_\_\_\_\_

Member & Affiliation \_\_\_\_\_

Member & Affiliation \_\_\_\_\_

Member & Affiliation \_\_\_\_\_

**Dissertation Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(SIGNATURE)

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(SIGNATURE)

**Graduate Coordinator:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(SIGNATURE)

#### SUMMARY OF CREDIT HOURS

(36 MINIMUM CREDITS MUST BE EARNED AT GMU IN DEGREE STATUS)

Courses from Previous Graduate Study (no more than 24 semester hours) \_\_\_\_\_

Non-degree Status Hours (no more than 12 semester hour) \_\_\_\_\_

Research Hours (minimum of 24 credits of 998-999) \_\_\_\_\_

(Please See Other Side)

