







PROPOSED PLAN OF STUDY -- EDD degree in curriculum EDCI (Continued)

(Last Name) (First) (Middle) Soc. Sec. Number

Dates:

- 1. Date of Qualifying Examination
2. Expected Date of Preliminary Examination
3. Expected Date of Receipt of Degree
4. Expected Date of Dissertation Prospectus Examination
5. Expected Date of Final Examination

Residency Statement: (Briefly list plan for full-time study and times at which this study will occur.)

Signatures:

(Student) (Chair) (Member) (Member) (Member) (Member) (Cognate Professor) (Soc. Sec. No.) (Date)

Check this box if two additional members will be added at the time of the preliminary exam.

(Division Director) (Dean of Graduate School) (Soc. Sec. No.) (Date)