Program of Studies

For the Doctoral Degree | Office of Graduate Studies | University of Nebraska-Lincoln

STUDENT AND PROGRAM

First Name _____ NUID Number _____

Last Name _____ Campus Email _____@huskers.unl.edu

Degree
- ☐ Ph.D.
- ☐ Au.D.
- ☐ D.M.A.
- ☐ D.P.H.
- ☐ Ed.D.

Major _____

Specialization _____

Minor _____

TRANSFER OF CREDIT

The Supervisory Committee recommends the following transfer of credit to the doctoral program at the University of Nebraska:
(Official transcripts showing the completion of credit to be transferred from other institutions must be on file in the Office of Graduate Studies prior to approval of the program; total hours can be no more than half of the program.)

Institution	Dept.	Course No.	Title	Cr. Hr.	Grade		Institution	Dept.	Course No.	Title	Cr. Hr.	Grade

Total credit hours transferred to the doctoral program at the University of Nebraska: ☐

GRADUATE COURSES ALREADY TAKEN AT THE UNIVERSITY OF NEBRASKA

The Committee accepts the following courses and thesis or dissertation research in which incomplete, pass, or letter grade reports have been received:

Major Courses							Minor or Related Courses					
Institution	Dept.	Course No.	Title	Cr. Hr.	Grade		Institution	Dept.	Course No.	Title	Cr. Hr.	Grade

Credit hours of graduate work at the University of Nebraska in which incomplete, pass, or letter grade reports have been received: ☐

Updated 2026/03 by OGS/JC

GRADUATE COURSES TO BE TAKEN

The Supervisory Committee approves the following courses and dissertation research hours that are in progress or to be taken. This portion of the program of study constitutes at least one-half of the minimum requirements:

Major Courses							Minor or Related Courses					
Institution	Dept.	Course No.	Title	Cr. Hr.	Grade		Institution	Dept.	Course No.	Title	Cr. Hr.	Grade

Credit hours of graduate work at the University of Nebraska in progress or to be taken: ☐
(Must total at least 45 credit hours)

TOTAL CREDIT HOURS IN THE PROGRAM OF STUDY: ☐
(Minimum 90 credit hours)

LANGUAGE, RESEARCH TOOL, OR COLLATERAL FIELD REQUIREMENTS

These courses/tools should not be listed above. They do not count toward the 90 credit hour requirement.

Institution	Dept.	Course No.	Title	Cr. Hr.	Grade		Institution	Dept.	Course No.	Title	Cr. Hr.	Grade

DISSERTATION AND RESEARCH

Topic of Dissertation or Doctoral Document _____

_____

Research Responsibility

I have discussed Institutional Review Board (IRB) and/or Institutional Animal Care and Use Committee (IACUC) requirements with my advisor or supervisory committee chair.

☐ Yes ☐ No ☐ Not applicable

APPROVAL OF THIS PROGRAM OF STUDY

Approved by Supervisory Committee Chair: _____
Signature *Date*

Approved by Departmental Graduate Program Chair: _____
Signature *Date*

Approved by Dean for Graduate Studies: _____
Signature *Date*

Tracking by the Office of Graduate Studies: _____
Date of Program Expiration