CE TENTATIVE PROGRAM OF WORK

(To be submitted before completion of the first 12 hours of graduate work)*
(Must be printed legibly)

Name of Student _____ Date _____
Last First Middle

Address _____ ID. Number _____

Degrees Held and Fields _____

Degree Sought _____ Major _____

Type of Degree Plan: Thesis ☐ Thesis Substitute ☐ Non-Thesis ☐ Dissertation ☐

TRANSFER CREDIT (for Master's Degrees Only - Maximum of 9 hours)

List as they appear on official transcript. UTA equivalent Course Number may be indicated in ( ) parentheses to the right of the institutional Course Number.* **If** Transfer Credit is applied to Program of Work, this form must be submitted the first semester the student is enrolled. Transfer Credit **may** not be used to satisfy Doctoral Degree Requirements. Transfer credit will not be granted for course work completed more than 5 years before initial enrollment in the Graduate School.

Course Number/Title	Institution	Credit Hours (Sem ☐ Quar ☐)	SM/Year Taken	Grade

UTA CREDIT

Note: List courses in the order they were taken. Subject Prefix and Course Number should correspond to those on the student's transcript. Indicate deficiency courses not counted toward the degree by enclosing in parentheses ( ).

Subject Prefix	Course Number	Course Title	Semester-Year
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —
— — — —	— — — —	_____	— — —

See Continuation Sheet(s) for: More UTA Courses ☐ and/or Deficiency Courses ☐

Examination Requirement(s) _____

Language Requirement(s) (Specify) _____

List any other requirement(s) assessed by the Committee _____

_____

APPROVALS AND DATES

(Signatures Required)

Student _____ Date _____

Supervising Professor _____ Date _____

Graduate Advisor _____ Date _____

Committee on Graduate Studies _____ Date _____

CEE(3-07)