UNIVERSITY of HOUSTON
YOU ARE THE PRIDE
C. T. BAUER COLLEGE of BUSINESS

Doctoral Program Degree Plan

Last Name _____ First Name _____ M.I. _____ Today's Date _____

Street Address _____ Student ID _____

City _____ State _____ Zip _____ email address _____

In compliance with the published requirements governing the doctoral degree, I hereby submit for approval my complete course of study with a major field in _____ and a supporting field of _____. That course which meets the research requirement in the major field is indicated by an asterisk. The residency requirement will be met during the period _____ to _____.

Student's signature: _____

Major Field

Course	Title	Semester/Year	Grade

Supporting Field

Research Requirement

Additional Coursework (if required by department. Should more space be needed, please attach another sheet.)

Approval Recommended:

Committee Chair Signature/Printed Name _____ Date _____

Member Signature/Printed Name _____ Date _____

Member Signature/Printed Name _____ Date _____

Supporting Field Member Signature/Printed Name _____ Date _____

Departmental Ph.D. Coordinator _____ Date _____

Director, Registration and Academic Records _____ Date _____
C.T. Bauer College of Business

May 2011