



Graduate Plan of Study

Graduate School (360) 650-3170
516 High Street, Bellingham, WA 98225-9037

#934067

This Plan of Study must be completed within the first quarter of graduate study. Consult with your Graduate Program Adviser and develop your individualized plan for degree completion. Additional instructions and guidelines are provided at this link: [Graduate Plan of Study Instructions and Guidelines](#).

SECTION I: STUDENT (complete Section I)

WWU ID: W00700777 Admit Term: Fall 2015 Catalog Year: 2015-16
 Last Name: Learning First Name: John
 WWU Email: learnij@students.wvu.edu
 Program: Adult and Higher Education
 Specialization: N/A

Required Selection-> Thesis* Non-Thesis

* Topic must be approved PRIOR to thesis registration.

https://esign.wvu.edu/admcs/process/forms/Grad_School/Thesis_Topic_Approval4.aspx

Enter all graduate program coursework in the box below. Lock-step programs where each student completes the same courses may attach the list of coursework on a separate page using the attach files button below.

Course #	Credits	Course #	Credits	Course #	Credits
AHE 501	4	AHE 592	4		
IT 546	4	AHE 518	4		
AHE 554 OR 555	4	AHE 578	4		
AHE 571	4	AHE 579	4		
AHE 576	4	AHE 584	4		
AHE 577	4				
AHE 580	4				
AHE 588	4				
Total					52

SECTION II: GRADUATE PROGRAM ADVISER (complete Section II)

TRANSFER WORK:		SPECIAL SKILLS OR LANGUAGE REQUIREMENT (IF REQUIRED):		ADMISSION STIPULATIONS:	
Limit of 12 qtr. credits may count toward degree. External transfer credit must be approved separately		Credits do not count toward degree		Credits do not count toward degree. Adviser: specify minimum acceptable grade for each course.	
Course #	Credits	Course #	Credits	Course #	Credits
Transfer Total					0

Comments:

The approver must enter the email address of the next approver or department and press Approve to send it or press LOCK to lock the form.

You have been automatically authenticated from MyWestern. If the information below is incorrect, please contact the ATUS Helpdesk at 650-3333.

When you LOCK, VOID or DISAPPROVE a form an email notification is forwarded to the Original Submitter and ONLY the Submitter.

Name: _____ ID # _____

Email To:

(Full WWU email address required, e.g. John.Doe@wwu.edu -- unless you are attaching a file, locking or voiding the form.)

Signatures

Title	Time	From	Dept	Phone	Sent To	Action
Program Coordinator	5/4/2015 5:14:29 PM	Sherry M Haskins Sherry.Haskins@wwu.edu	Human Services and Rehabilitation	x3190	Sherry.Haskins@wwu.edu	Submit