U of A Chemistry and Biochemistry Department GRADUATE STUDENT DEGREE PLAN Please save as a PDF and send to each committee member and Jingyi Chen (chenj@uark.edu) for your dept. file Name: Date: Proposed program: MS PhD Concentration: Previous degree(s) received: (1) (major(s), (2) date(s), (3) school(s), (4) GPA(s) Date Language Exam passed *If applicable* (SLPT, TOEFL, etc.): Undergraduate courses in chemistry completed at the U of A: (1) course name(s), (2) course number(s), (3) date(s) taken, (4) credit hours, (5) grade(s) Graduate courses completed elsewhere during this program: (1) course name(s), (2) course number(s), (3) date(s) taken, (4) credit hours, (5) grade(s) Graduate courses completed at the University of Arkansas: (1) course name(s), (2) course number(s), (3) date(s) taken, (4) credit hours, grade(s) Courses in progress: course name(s), course number(s), credit hours Proposed future courses: (1) course name(s), (2) course number(s), (3) credit hours CUMEs: (1) Start date, (2) each required field and number, (3) number passed to date, (4) each allowed non-major CUMEs allowed and number required, and number passed to date

Candidacy Exam date passed:

Thesis/Dissertation subject:

Advisory Committee Members:

Χ		
Advisory Chair		