University of Arkansas Department of Chemistry and Biochemistry
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

Date:

Name :

Proposed program:

☐ MS ☐ PhD

Concentration:

Analytical

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:
(1) course name(s), (2) course number(s), (3) 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:

X

Advisory Chair