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## Program of Study for the Master's or Certificate Degree

This program of study must be submitted to the Graduate School before completion of twelve credit hours or by the third registration, whichever comes first. Completion of all work indicated on this program of study is a prerequisite for conferring the degree. Any changes to the course work listed on this program of study should be submitted to the Graduate School on the "Change in Program of Study" form.

Date received by Graduate School

*Please type or print clearly*

Name \_\_\_\_\_ ID # \_\_\_\_\_  
(First Last) 7 digit Student ID

Email \_\_\_\_\_ Phone \_\_\_\_\_

Current mailing address \_\_\_\_\_

Degree sought ☐ Master's ☐ Certificate of Advanced Study Field of study \_\_\_\_\_

Concentration (if applicable) \_\_\_\_\_ ☐ Thesis ☐ Non-Thesis

Date \_\_\_\_\_ Student's Signature \_\_\_\_\_

Advisory Committee (please type or print)

Signatures

Chair

<u>Graduate Coordinator (Required)</u>	

Program Requirements: \_\_\_\_\_

Responsible Conduct for Research Requirement Met: ☐ YES ☐ NO ☐ N/A Course Taken: \_\_\_\_\_

Human/Animal Subjects Review Committee Approval: ☐ YES ☐ NO ☐ N/A

Thesis topic: \_\_\_\_\_

Statement of the scope and proposed plan of treatment for the thesis: \_\_\_\_\_

Requests for all committee changes should be sent via email from current advisor to Debbi Clements at [debbi.clements@maine.edu](mailto:debbi.clements@maine.edu).

Name

ID #

## Course Work

List in chronological order all courses that fulfill the requirement for the degree attempting. This includes prerequisites and courses to be transferred in from another institution. Please be advised: only 400 level and above courses can be used toward a degree. When listing prerequisite or audit courses - enter 0 (zero) in the "Course Credits" field.

[illegible]

UMaine credits:	Transfer credits:	Total number of credits:
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