



**NORTH CAROLINA AGRICULTURAL  
AND TECHNICAL STATE UNIVERSITY**  
THE GRADUATE COLLEGE

**INDIVIDUAL ATTENTION. ADVANCED KNOWLEDGE.**



**PLAN OF GRADUATE STUDY**

**Expected Graduation:**

REVISED \_\_\_\_\_ DATE \_\_\_\_\_

Last:	First:	Banner ID
Student Email:		Student Phone:
College:		Major:

**Credit Hours**

Required Credit Hours	Certificate	Master's	PhD	<b>FORM MUST BE TYPED, HANDWRITTEN FORMS WILL NOT BE ACCEPTED</b>
Coursework				
Master's Project				
Thesis				
Dissertation				
<b>Total Credit Hours</b>				

**Academic Advisor/Committee Members**

Name	Department	Email
Academic Advisor/Committee Chair:		

**Graduate Courses Completed at Other Institutions** (Transfer Credit should be approved and submitted within the first semester of graduate course work.)

Institution/Course Number	A&T Course Equivalent (Prefix/Course Number)	Date	Credits	Grade

**Note: Degree-seeking students must submit an approved Plan of Graduate Study to the Graduate College by the end of the second semester of admission to the degree program. Changes or substitutions for required courses will require submission of a revised Plan of Graduate Study.**

**\*Graduate Students must enroll and complete an application for graduation in the semester they plan to graduate.**

