Ph.D. in Business Administration

Program of Study

Name: _____ Last Name First MI Student ID#: _____	Ph.D. Program Start Semester: _____

Major Field: Specify: _____

Course Number & Title	Sem/Grade	Course Number & Title	Sem/Grade

Approved by <u>Major</u> Field Coordinator:_____
Signature Date

Research Field:

Course Number & Title	Sem/Grade	Course Number & Title	Sem/Grade

Approved by <u>Major</u> Field Coordinator:_____
Signature Date

<u>APPROVAL OF SUPERVISORY COMMITTEE</u>

Chair (Major Field) _____
Typed Signature Date

Member (Major Field) _____
Typed Signature Date

Member (Major Field) _____
Typed Signature Date

Member (Research Field) _____
Typed Signature Date

Student:_____ **Ph.D. Director:**_____
Signature Date Signature Date