## **Program of Study for Non-Doctoral Professional Degrees**

The University of Georgia Graduate School 210 S. Jackson St., Athens, GA 30602

(Please submit this original **TYPED** form and one (1) copy of this form to the Graduate School)

Name						CAN # (810)				Text			
Address					De	egree					TCAC		
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Course Prefix-#	Hours	Grade	Term	Course Prefix-		Hours	Grade	Term	Course Prefix-#	Hou	urs Gra	de	Term
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Departmental	l Requir	ements											
We approve	the abo	ve Prog	ram of St	tudy for t	he deg	gree indi	cated.						
Major Professor						Date							
Graduate Coordinator							Date						
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Graduate Dean								Date					
Courses start to	expire a	nt						GPA					