University of Alaska Fairbanks

PROPOSED INTERDISCIPLINARY PH.D. DEGREE
GRADUATE STUDY PLAN (GSP) APPLICATION

Date: __________________________

Name: __________________________ SID# (student ID#) __________________________

Phone # __________________________ Email: __________________________

Mailing Address __________________________

______________________________

Degree Sought: ______ Ph.D. ______ Proposed Degree Title: __________________________

(Example: Soil Chemistry, Acoustics Fisheries)

LIST THE PROPOSED COMMITTEE MEMBERS:

<table>
<thead>
<tr>
<th>Committee Membership Signatures (by signing you agree to serve on the committee)</th>
<th>Please Print Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advisor:</td>
<td></td>
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| | *

* Committee member from Ph.D. granting department.

1. CREDITS TO BE INCLUDED IN DEGREE PROGRAM

UNIVERSITY OF ALASKA credits (coursework, research, and thesis)

600-level (including thesis, project, and research credits):

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Dept. &amp; No.</th>
<th>Title</th>
<th>Credits</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 05</td>
<td>ANTH 699 (example)</td>
<td>Thesis</td>
<td>6</td>
<td>DF</td>
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Updated 2/2/06
UNIVERSITY OF ALASKA credits

400-level:

Deficiency courses (Required courses that will not count toward your minimum credit requirement, i.e. 100, 200, 300 level courses):

TRANSFER COURSES: Graduate degree credit will be transferable within the UA system and from any other accredited institution for courses where the student has received a grade of B or better with the following stipulations: up to 1/2 of all graduate degree credits may be transferred with no more than 1/3 of all graduate degree credits transferred from any other accredited institution outside the UA system. All transfer credits must have been taken within the appropriate time limit for the degree.

Courses are to be transferred from ________________________________

MINIMUM CREDITS REQUIRED FOR DEGREE PROGRAM

YOUR TOTAL PROGRAM CREDITS:

graduate __________

(400 level only) undergraduate __________

II. Specific subject areas in which the student will be examined on comprehensive examination.
III. Preliminary title of thesis or project:

IV. **Estimate** date of completion for the following:

- Qualifying examination (if required)
- Comprehensive examination
- Advancement to candidacy
- Completing coursework
- Completion of first draft of thesis
- Thesis defense

I have reviewed the proposed INDS Ph.D. Graduate Study Plan submitted by this applicant and agree to serve as the major advisor to this applicant if he/she is admitted. I have attached my current vitae.

PRINT NAME OF ADVISOR: ___________________________ SIGNATURE: ___________________________ DATE: ________________

Department: ___________________________ Email: ___________________________ Phone: ___________________________

I agree to consider the proposed INDS Ph.D. applicant being home-based in the:

__________________________Department (the department of the major advisor) and to the appropriate workload allocation for the major advisor.

PRINT NAME: ___________________________ SIGNATURE: ___________________________ DATE: ________________

Department Chair: ___________________________ ___________________________ ___________________________

Dean of College or School where applicant will be home-based.