**WAYNE STATE UNIVERSITY**
**MASTER OF SCIENCE**
Plan-of-Work & Petition for Candidacy

**STUDENT**
NAME _______________________________ I.D.#. ___________________ DATE ____________

Last
First

**ADDRESS**
street ______________________________ city __________________ state ___________ zip ___________

PHONE ______________________________ EMAIL: __________________

MAJOR: _______________________________ Advisor __________________ Degree Plan: ______________

**INSTRUCTIONS:** Review all general and departmental or college degree requirements published in WSU Bulletin. List chronologically all WSU credits earned or proposed which will apply toward fulfillment of Master’s degree requirements.

PRESENT TO ADVISOR FOR APPROVAL AND FORWARD TO GRADUATE PROGRAMS OFFICE, SCHOOL OF MEDICINE.

### COURSES COMPLETED & PROPOSED

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<tr>
<th>Term-Yr</th>
<th>Dept-No</th>
<th>Title</th>
<th>MAJOR HRS</th>
<th>MINOR/COGNATE</th>
<th>CORE HRS.</th>
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Totals Hours in Degree Program ________________________________ TOTALS: ______________

**APPROVED BY:** ___________________ Advisor __________________ Date: ______________

**APPLICANT'S PETITION FOR CANDIDACY** ______________________ Signature ______________ Date: ______________

**CANDIDACY RECOMMENDED BY:** ______________________________

Program Director __________________ Date: ______________

Program Coordinator's Signature __________________ Date: ______________

(Advisor can recommend candidacy at time POW is presented, or candidacy may be recommended by memorandum. In general, candidacy is recommended before the student has completed 8 credit hours.)