

UNIVERSITY OF MASSACHUSETTS/AMHERST
DEPARTMENT OF COMMUNICATION
Ph.D. DEGREE PLAN-OF-STUDY
(FOR STUDENTS WITH M.A. OUTSIDE OF COMM.)

Name:

Date Admitted to Program

Advisory Committee: _____(Chair)

Major Area of Concentration: _____

Scholarly Tool: _____

Comprehensive Examinations Scheduled or Planned:

I. CORE COURSES:

<u>UNIV.</u>	<u>DEPT.</u>	<u>NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
	COMM	611	Intro toTheories & Concepts of Human Comm			
	COMM	620	Qualitative Methods Research			
	COMM	621	Quantitative Methods Research			
	COMM	891A	Proseminar: Graduate Introduction to Communication	2 semesters	1 credit	

I: TOTAL CREDITS

II. SURVEY CORE COURSE REQUIREMENT(minimum:6 credits) From TWO of the following: 691B, 613, 693D, or 695S

<u>UNIV.</u>	<u>DEPT.</u>	<u>NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
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II: TOTAL CREDITS

III. TOOL COURSES (minimum: 6 credits)

<u>UNIV.</u>	<u>DEPT.</u>	<u>NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
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III: TOTAL CREDITS

IV. DIRECTED RESEARCH AND INDEPENDENT STUDY (maximun: 6 credits)

<u>UNIV.</u>	<u>DEPT</u>	<u>NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
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IV: TOTAL CREDITS

V. OTHER COURSES TAKEN IN THE DEPARTMENT OF COMMUNICATION (at least 12 credits at the 700-level or above;
or 600-level when cross-listed with the School for Public Policy)

<u>UNIV.</u>	<u>DEPT. NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
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V: TOTAL CREDITS

VI. UMASS COURSES TAKEN OUTSIDE THE DEPARTMENT: (minimum: 3 credits)

<u>UNIV.</u>	<u>DEPT. NUMBER</u>	<u>TITLE</u>	<u>SEMESTER</u>	<u>CREDITS</u>	<u>GRADE</u>
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VI.TOTAL CREDITS

VII. COURSES TAKEN OUTSIDE UMASS TO BE COUNTED TOWARDS THE Ph.D. (if not listed above)

<u>UNIV.</u>	<u>DEPT. NUMBER</u>	<u>TITLE</u>
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VII: TOTAL CREDITS

VIII. SPECIAL CONSIDERATIONS (requirement waivers, transfer of other credits, etc.):

IX. TOTAL CREDITS (minimum: 66; 33 U-Mass Comm Credits - see Handbook for any additional requirements)

Total

credits listed in Items I. through VII. above.



Student's Signature:_____

Date:_____

APPROVED:

Advisor's Signature:_____

Date:_____

GS Director's Signature:_____

Date:_____