



Ph.D. Plan of Study

Please complete the PhD Plan of Study by the end of the second semester in the PhD program.

Submit to the Graduate Studies Program office – Room 205 Dreese Laboratories.

Remember to attach a current OSU advising report to the PhD plan form.
The advising report can be found in your Student Center.

Student Name: _____ Date Submitted: _____

OSU Name #: _____ OSU ID #: _____

Campus Address: _____ Phone: _____

Advisor: _____ PhD Degree Program:
BS – PhD MS – PhD

First term and year in your current degree program: _____
AU SP SU Year

Scholarships, fellowships, assistantships currently in effect: _____

Undergraduate University _____ Year _____ GPA _____

Previous Graduate School _____ Year _____ GPA _____
Attach copy of transcript if MS from another university

Undergraduate Major: _____

Primary Area of Study: _____

Secondary Area of Study: _____

Master's Thesis Title: _____

