MASTER OF SCIENCE IN NURSING SCIENCE

VERIFICATION OF DEGREE COMPLETION

(INCLUDING PRELIMINARY EXAM)

**Student Name** (as will appear on degree):

has successfully completed all requirements for the Master of Science in Nursing Science Degree, **including the**

**PhD Preliminary Exam**

|  |  |  |
| --- | --- | --- |
| **MS Degree Course Requirements**  **Minimum 36 total credits required** | **Credits** | **Quarter(s) Completed** |
| NURS 587 (1 credit x 3) | 3 |  |
| NURS 588 (4 credits) | 4 |  |
| NURS 589 (4 credits) | 4 |  |
| NMETH 582 (4 credits) | 4 |  |
| NMETH 579 (5 credits) | 5 |  |
| **Minimum 9 credits of statistics** |  | |
|  |  |  |
| **Minimum 7 credits of electives** |  | |
|  |  |  |

**Date**:

**Student Signature:**

The below signed serve as committee members of record for preliminary examination and verification of degree requirements:

**PhD Program Director:** Frances Marcus Lewis

**Signature:**  **Date**

**PhD Coordinating Committee Chair:** Hilaire Thompson

**Signature:** **Date**

**Student and Academic Services Use Only**

Qtrs in Program: Elapsed Time: FT/PT:

12/2021

**Credit Hours:** Total Nursing: Non-Nursing:

**Final GPA:**

*Revised 10/12/2022 BM/ Original form approved PhDCC AUT 2021*