



This form should be downloaded and filled out on your computer, then saved with a new file name to your local disk. Next, print the form and obtain the necessary signatures.

Last Name:		First Name:		MI:	USC ID:
Street:			City:		State: Zip:
Email:				Phone:	
Degree:	Major:			Track:	

Admitted to Doctoral Candidacy:		Foreign Languages required:	Date Completed
Advisory Committee Approved:			

**Doctoral Residency Requirement**

Please select one option and document the terms and coursework that satisfies the requirement

**Option 1: Two consecutive full-time semesters:** 9+ credit hours or Graduate Assistant with 6+ credit hours

**Option 2: Approved program-specific alternative**

Term	Year	GA?	Course Numbers (with credit hours)

**Program of Courses**

In the spaces provided below, list all courses for which approval is requested in the doctoral program, including dissertation courses. Example: ENGL 751 Amer. Novel in 20th Cent. This program must include at least 18 semester hours, other than 899, which are not used for any other degree program. Do not list courses not specifically required for this student's doctoral program. Note that any course on this program which exceeds the 10-year limit before the degree is awarded must be revalidated or replaced with another course.

Dept Prefix	Course Number	Abbreviated Course Title	Term Completed	Year	Credit Hours	Grade	Where Taken

**Approval Signatures**

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Graduate Director of Program or School Date

\_\_\_\_\_  
Major Professor Date

\_\_\_\_\_  
Dean of the Graduate School Date