HISTORY M.A. PLAN OF STUDY
(entered program Fall 2013 and later)

Student’s name: _________________________________ Student ID#: __________________________

Degree: MA  Major: History

Hours Required for Degree (required hours: 30; without language certification: 33):

UNCG: ______ Transfer: ______ Semester start date: __________________________

Mentor: ____________________________ Planned Date of Graduation: ____________

Field of Study #1: ____________________________

2nd Committee Member: ______________________

Field of Study #2: ____________________________

3rd Committee Member: ______________________

Field of Study #3: ____________________________

REQUIRED COURSES

HIS 510 Historiography

Credit Hours: _____ Instructor: _________________ Semester/Year Taken: _____________

HIS 709 Introductory Research Seminar:

Credit Hours: _____ Instructor: _________________ Semester/Year Taken: _____________

HIS 703 & HIS 704 Advanced Research Seminars:
(Taken with Main Advisor)

HIS 703 (3 credit hours): Semester/Year Taken: ______________

HIS 704 (3 credit hours): Semester/Year Taken: ______________

COLLOQUIA (9 hours) (HIS 701, 702, 705, 706, 710, or 716):

Course Title/#: ____________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

**ELECTIVES (9 hours):**

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

Course Title/#: __________________________________________________________
Credit Hours: ______  Semester/Year Taken: ____________  Instructor: ______________

**LANGUAGE CERTIFICATION** (May take an extra course (3 hours) in lieu of language certification):

Language: __________________________

Date of Language Exam: ______________

OR Extra Course Title/#: __________________________________________________

Credit Hours: ____________  Semester/Year Taken: ______________

**COMPREHENSIVE EXAM**

Semester/Year Taken: ______________

**SIGNATURES:**

Student’s Signature: ____________________________  Date: ______________

Director of Graduate Studies: __________________________  Date: ______________

Mentor: ____________________________________________  Date: ______________