Application Deadlines*

May Graduation – Nov. 1 Aug. Graduation – Mar. 1 Dec. Graduation – June 1

Hampton University - The Graduate College

APPLICATION FOR ADMISSION TO CANDIDACY FOR DEGREE COMPLETION Nursing – Educator (NURS-NED)

Only fully complete forms will be processed when submitted before the application deadline.

| cal Address (Street, asters of Science | | state, Zip Code) | | | Student ID Number Email Address | | | | | |
|--|------------|--|--|-------------------|---------------------------------|------------------|--|--|--|--|
| | <u>e</u> | | al Address (Street, City, State, Zip Code) | | | | Permanent Address (Street, City, State, Zip) | | | |
| | <u>e</u> | | | | | | | | | |
| gree | | Hometown (City, State, Country) f | for Comme | nament Program | | Talanh | one Number | | | |
| | | Hometown (City, State, Country) | of Comme | ncement Frogram | | Тетеріі | one Number | | | |
| ay / Aug / Dec 2 | 20 | | | | | | | | | |
| pected month and ye | | graduation Pre | evious degr | ees earned (Unive | ersity, Degree, Year | :) | | | | |
| rcle one and includ | | | | | | , | | | | |
| | | ript (HUnet) to complete the Degree Plan of | | | | | | | | |
| | | ll be taken and the grade received. Indicate | | | priate column wi | th the course ar | nd number. Put | | | |
| eck mark (V) in the | e appı | ropriate column if a course is transfer credit Degree Plan of Study | | 1. Term Grade | e Substitute* | Transfer* | Waived* | | | |
| Required (| Ours | es: 28 credits | Cr | Term Grade | e Substitute" | 1 ransier* | waiveu | | | |
| | 510 | Conceptual Approaches to Nursing | 2 | | | | | | | |
| | 512 | Organizational Behavior/Group and | 3 | | | | | | | |
| NUR | 514 | Concepts and Techniques of Primary | 4 | | | | | | | |
| NUR | 604 | Curriculum Development in Nursing | 3 | | | | | | | |
| | 605 | Teaching Adult Nursing | 4 | | | | | | | |
| | 608 | Pathophysiology | 3 | | | | | | | |
| | 609 | Nursing Colloquium | 3 | | | | | | | |
| | 678 600 | Family Health Nursing: Theory and Statistics | 3 | | | | | | | |
| | | irses: 4 or 5 credits (Check Plan A or Plan | - | | | | | | | |
| Plan A | | NUR 681: Thesis | 1 4 | | | | | | | |
| Plan B | | NUR 683: Research Methods in Nursing | 4 | | | | | | | |
| T lan B | _ | NUR 702: Comprehensive Examination | 1 | | | | | | | |
| Clinically S | Specia | alty Courses: 8 credits (Choose one: Com | munity N | Iental Health/P | sychiatric, Com | munity Health | , or | | | |
| Advanced A | | Nursing) | | | , | · | | | | |
| | 610 | Community Mental Health/Psychiatric | 4 | | | | | | | |
| | 611 | Community Mental Health/Psychiatric | 4 | | | | | | | |
| | 612 | Community Health | 4 | | | | | | | |
| | 613 614 | Community Health | 4 | | | | | | | |
| <u> </u> | 615 | Advanced Adult Nursing Advanced Adult Nursing | 4 | | | | | | | |
| Elective Co | | | | | <u> </u> | | | | | |
| | | | | | | | | | | |
| | | ust be filed to receive credit for course subst | | | | | | | | |