



Ph.D. Program of Study

| | |
|---|--|
| Student Name: | |
| UFID: | |
| Date of Committee Meeting to Consider POS: | |

| | |
|-----------------|--|
| Process: | |
| 1. | Student and Committee Chair draft POS |
| 2. | Draft POS to Graduate Coordinator for review |
| 3. | Graduate Committee approval of POS |
| 4. | Send POS to Academic Program Specialist to circulate for committee signatures via DocuSign |
| 5. | Submit research proposal to Academic Program Specialist for student file. |

| Agronomy Courses contributing to the AY major (e.g., ALS, AGR, PLS, STA 6093) | Credits | Semester, Year | Grade |
|---|---------|----------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| AGR 7979 – Supervised Research | | Various | |
| AGR 7980 – Doctoral Research | | Various | |
| AGR 6933 – Agronomy Seminar | 1 | | |
| Credits Transferred from M.S. | | NA | NA |
| Courses outside the AY major | Credits | Semester, Year | Grade |
| | | | |
| | | | |
| | | | |
| | | | |
| Courses in the Minor | Credits | Semester, Year | Grade |
| | | | |
| | | | |
| | | | |
| | | | |
| Do you have \geq 90 total credit hours (includes transferred credit)? | | | |

SIGNATURES

STUDENT SIGNATURE, DATE:

COMMITTEE CHAIR SIGNATURE, DATE:

CO-CHAIR ROLE, SIGNATURE:

MEMBER ROLE, SIGNATURE:

MEMBER ROLE, SIGNATURE:

EXTERNAL MEMBER ROLE,
NAME/SIGNATURE:

SPECIAL MEMBER ROLE,
NAME/SIGNATURE:

This form serves as a contract between the Supervisory Committee and the student regarding the requirements to fulfill the degree. Any substitutions or omissions from the schedule set forth on this form must be approved by the Supervisory Committee and communicated by email to the Graduate Coordinator and Academic Program Specialist before the degree will be conferred.