

## Department of Communication Studies Program of Study

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Capstone Experience: Thesis  Creative Thesis

Option  Pedagogy

Course	Semester	Course	Semester
CMN 5900	_____	CMN 5901	_____

Date Program Started: \_\_\_\_\_ Date program must be complete: \_\_\_\_\_  
(Five years from start)

**Core Classes**

Course	Semester	Course	Semester
CMN 5000	_____	CMN 5020	_____
CMN 5000	_____	CMN 5030	_____

Date Comprehensive Exam Scheduled: \_\_\_\_\_

Passed:  No  Yes    Date: \_\_\_\_\_

- Track  Strategic Communication (5170, 5700, 5710, 5720)  
 Human Communication (5150, 5510, 550, 5530)  
 Critical/Cultural Studies (5010, 516-, 5180, 5610)

Course	Term	Course	Term
_____	_____	_____	_____
_____	_____	_____	_____

Thesis Title: \_\_\_\_\_

Course	Semester	Course	Semester	Course	Semester
_____	_____	_____	_____	_____	_____

Total Hours: \_\_\_\_\_ Date Thesis completed: \_\_\_\_\_

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

\_\_\_\_\_  
Graduate Coordinator Date