



REGISTRATION FORM: PHD PROGRAM IN PSYCHOLOGY
(AREAS OTHER THAN CLINICAL)
Regular Session 20__ – 20__ & Summer Session 20__

Name (print): _____ Student Number: _____
 U of M Email: _____ Area: _____
 Street Address: _____ City/Prov: _____ Postal Code: _____
 Preferred Phone: _____ Alternate Phone: _____
 Full-Time: Part-Time: Expected Graduation Date: FEB MAY OCT YEAR 20__
(only to be completed by students in their graduating year)

PLANNING GUIDE

| Course Requirements | Previously completed (course #) | Registering current year (course #) |
|--|---------------------------------|-------------------------------------|
| Two half-courses from the defined major | | |
| One ancillary half-course (from the Psychology graduate curriculum or 4000 level or above from another department) | | |
| One half-course in Research Design or Quantitative Methods | | |
| GRAD 8010 Candidacy Exam | | |
| Thesis Proposal Development (PSYC 7790) *** (separate registration form required) | | |
| GRAD 7500 Academic Integrity Tutorial (unless completed previously) GRAD 7300 Research Integrity Tutorial (unless completed previously) | | |
| Dissertation (Grad 8000) | | |
| Additional course requirements (if any) | | |

*** Student must complete PSYC 7790 no later than 8th term of registration in PhD level

REGISTRATION INFORMATION CURRENT ACADEMIC YEAR

| Course No. | Aurora CRN | Course Name | Term F/W/S | Credit Hours | Course Class * |
|------------|------------|-------------|------------|--------------|----------------|
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*Course Classification – Standard or AuXillary or Occasional or Audit

SIGNATURES:

Student: _____ Date: _____
 Academic Advisor: _____ Date: _____
 Associate Head (Graduate) or designate: _____ Date: _____

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