

REGISTRATION FORM: PHD QUANTITATIVE/METHODOLOGY IN PSYCHOLOGY Regular Session 20___ - 20___ & Summer Session 20___

Name (print):			Student Number:				
U of M Email:			Area:				
Street Address:	treet Address:City/Prov:			Postal Code:			
Preferred Phone:			Alternate Phone:				
Full-Time:		Expected Graduation Date: FEE (only to be completed by students in their gr		Ост	YEAF	₹ 20	
PLANNING GUI			Previously compl	eted I	Registering o	urrent vear	
Course Requirements			(course #)		(course #)		
Two half-courses (in research m							
One ancillary half or 4000 level							
		ngy graduate curriculum providing breadth in a of research interest)					
GRAD 8010 Cand	didacy Exam						
Thesis Proposal I	Development (PS) ete PSYC 7790 no la	YC 7790) (separate registration form required) ater than 8 th term of registration in PhD level					
		torial (unless completed previously) orial (unless completed previously)					
Dissertation (Grad	d 8000)						
Additional course requirements (if any)							
REGISTRATION	INFORMATIO	N CURRENT ACADEMIC YEAR		<u> </u>			
Course No.	Aurora CRN	Course Name		Term F/W/S	Credit Hours	Course Class *	
		*Course C	assification – <u>S</u> tanda	l rd or Au X illa	ry or <u>O</u> ccasio	l nal or <u>A</u> udit	
SIGNATURES:							
Student:			Date:				
Academic Advis	Date:						
Academic Co-Advisor:			Date:				
Associate Head (Graduate) or designate:			Date:				

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