Graduate College Counselor

Hampton University – The Graduate College

Application Deadlines*
May Graduation – Nov. 1
Aug. Graduation – Mar. 1
Dec. Graduation – Jun. 1

APPLICATION FOR ADMISSION TO CANDIDACY FOR DEGREE COMPLETON

Communication Sciences and Disorder (CSAD)

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

I wish to apply for candidacy and graduation. I am applying at least 6 months (but no more than 1 year) prior to my expected graduation date, have met all admission requirements, have a cumulative GPA of 3.0 or higher, and do not have any incomplete course work.

Clearly **print** your full name as it should appear on the diploma (limit to three names) _____ Student ID Number _____ Email Address _____

Local Address (Street, City, State, Zip Code) _____ Permanent Address (Street, City, State, Zip) _____

Masters of Arts
Degree

Hometown (City, State, Country) for Commencement Program _____ Telephone Number _____

Spring ◯ Summer ◯ Fall ◯ Year: _____
Expected month and year of graduation (**Circle one** and **include year**)

Previous degrees earned (University, Degree, Year) _____

Use your unofficial transcript (HUnet) to complete the Degree Plan of Study below. Identify the term (Fall = F, Spring = S, Summer = Su) and year for which a course was/will be taken and the grade received. Indicate substitutions in the appropriate column with the course and number. Put a check mark (√) in the appropriate column if a course is transfer credit or waived.

Degree Plan of Study 49 Credits (2008 Catalog – Present)			Cr	Term	Grade	Substitute*	Transfer*	Waived*
Required Courses: 43 Credits								
CDS	501	Research Design in Speech and Hearing	3					
CDS	507	Stuttering and Other Fluency Disorders	3					
CDS	523	Early Intervention with Spe Needs Pop	3					
CDS	602	Intro to Clinical Practice	3					
CDS	603	Neurolinguistic Disorders in Adults	3					
CDS	606	Voice Disorders	3					
CDS	612	Artic & Phonological Disorders	3					
CDS	618	Advanced Clinic Pract – Credits 3 Spring	6					
CDS	618	Advanced Clinic Pract – Credit 1 Summer						
CDS	618	Advanced Clinic Pract – Credit 1 Fall						
CDS	618	Advanced Clinic Pract – Credit 1 Spring						
CDS	621	Language Disorders	3					
CDS	625	Motor Speech Disorders	3					
CDS	628	Diagnosis & Management Swallowing	3					
CDS	630	Augment and Alternative Comm (AAC)	3					
CDS	699	Independent Research I	2					
CDS	700	Independent Research II	1					
CDS	702	Comprehensive Examination	1					
Elective Courses: 6 Credits								
CDS			1					
CDS			2					
CDS			3					

*The appropriate forms must be filed to receive credit for course substitutions, transfer credit and waivers. **Total Credits: 49**

I understand that I may not deviate from the Degree Plan of Study without permission from the Dean of the Graduate College.

Student's Signature _____ Date _____ Program Coordinator's or Dept. Chair's Signature _____ Date _____

For Official Use Only

Met Admission Requirements: _____
Cumulative GPA: _____
Incomplete Coursework: _____
Comprehensive Examination _____

☐ Approved ☐ Denied ☐ Hold

Reason for denial: _____

Dean, Graduate College Signature _____ Date _____

***Late applications require written explanation to be approved by the Provost.**

Revised 02/2025