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Graduate College
Counselor

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

## Hampton University – The Graduate College

**APPLICATION FOR ADMISSION TO CANDIDACY FOR DEGREE COMPLETION**
**Physical Therapy (PTHY)**
*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 (except research/thesis).

_____ _____ _____
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)

Doctor of Physical Therapy _____ _____
Degree Hometown (City, State, Country) for Commencement Program Telephone Number

May ○ Aug ○ Dec ○ 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**

**Required Course: 112credits**

| Course Code | | Cr | Term | Grade | Other | Course Code | | Cr | Term | Grade | Other |
|---|---|---|---|---|---|---|---|---|---|---|---|
| PHT | 600 | 6 | | | | PHT | 641 | 4 | | | |
| PHT | 602 | 4 | | | | PHT | 642 | 2 | | | |
| PHT | 604 | 5 | | | | PHT | 643 | 3 | | | |
| PHT | 606 | 3 | | | | PHT | 645 | 4 | | | |
| PHT | 607 | 2 | | | | PHT | 647 | 3 | | | |
| PHT | 609 | 1 | | | | PHT | 649 | 3 | | | |
| PHT | 611 | 4 | | | | PHT | 651 | 3 | | | |
| PHT | 612 | 3 | | | | PHT | 653 | 3 | | | |
| PHT | 614 | 3 | | | | PHT | 655 | 2 | | | |
| PHT | 615 | 1 | | | | PHT | 659 | 1 | | | |
| PHT | 616 | 3 | | | | PHT | 661 | 4 | | | |
| PHT | 617 | 3 | | | | PHT | 663 | 4 | | | |
| PHT | 618 | 2 | | | | PHT | 664 | 3 | | | |
| PHT | 620 | 2 | | | | PHT | 665 | 1 | | | |
| PHT | 625 | 1 | | | | PHT | 668 | 2 | | | |
| PHT | 630 | 3 | | | | PHT | 669 | 4 | | | |
| PHT | 631 | 4 | | | | PHT | 673 | 2 | | | |
| PHT | 634 | 3 | | | | PHT | 677 | 4 | | | |
| PHT | 635 | 4 | | | | PHT | 675 | 2 | | | |
| | | | | | | PHT | 679 | 1 | | | |

*The appropriate forms must be filed to receive credit for course substitutions, transfer credit and waivers. **Total Credits: 112**
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 all Admission Requirements:_____
Cumulative GPA: _____
Incomplete Coursework: _____
Advisory Committee Approved: _____
Dissertation Approved: _____
Qualifying/Comp. Exam ____/_____

Approved ☐ Denied ☐ Hold & Resubmit ☐

Reason for denial: _____
_____

_____
Dean, Graduate College Signature Date

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

Revised 01/2020