

**SAN DIEGO STATE UNIVERSITY
SCHOOL OF NURSING**

Comprehensive Management Project Intent Form

Comprehensive Management Project Intent Form is due to the Graduate Advisor by:

- *March 1st for a December graduation*
- *October 1st for a May graduation*

Today's Date _____

Student Name _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email address _____

Date of Phase I of Comprehensive Management Project: _____

Planned Graduation Date: _____

Concentration of Study (circle one)

NSA CHN CHN/School Nurse CHN/Midwifery CHN/Midwifery & WHCNP

CHN/Women's Health Care Nurse Practitioner

4/17/2006