

SDSU Official Program of Study and Advancement to Candidacy

Degree: MS
 Major: Nursing
 Concentration: Community Health Nursing

Student Name _____
(Last) (First) (Middle)

Red ID _____ email _____

Address _____

(City) (State) (Zip Code)

Day Phone # _____ Evening Phone # _____

Dept	Course #	Title	Units
NUR	604A	Theoretical & Research Bases of Nursing	3
NUR	604B	Theoretical & Research Bases of Nursing	3
NUR	608	Nursing in the Health Care System	3
NUR	684	Information Systems in Nursing	3
NUR	630	Community Health Nursing Theory	3
NUR	631	Community Health Nursing Practicum	3
NUR	730	Advanced Community Health Nursing	3
NUR	732	Advanced Community Health Nursing Practicum	3
NUR	736	Seminar in Community Health Nursing	3
PH	601	Epidemiology	3

Electives (fill in the course number and name)

_____ 3
 _____ 3

Check the appropriate selection. Thesis/comp exam 3
 Plan A (Thesis/Project-799A) _____
 Plan B (Comp Exam-798) _____ Total Units **39**

I accept this program of study: _____
(Student signature) (date)

I approve this program of study and recommend for advancement to candidacy.

(Graduate Advisor) (date)