**MPOS**

THE GRADUATE SCHOOL South Carolina

# Master's Degree or Certificate Program of Study

*This form should be filled out on your computer, then saved with a new file name to your local disk.*
*Next, print the form and obtain the necessary signatures.*

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|---|---|---|---|
| **Last Name:** | **First Name:** | **MI:** | **USC ID:** |
| **Street:** | **City:** | **State:** | **Zip:** |
| **Email:** | **Phone:** | | |
| **Degree:** MSN | **Major:** Mstr's Entry to Prctce Nursing | **Track:** | |

| **Admitted to Program** | **Term** | **Year** | **Foreign Languages required:** | **Date Completed** |
|---|---|---|---|---|
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**Other Requirements:**

## Program of Courses

In the spaces provided below, list all courses for which approval is requested in the master's degree (including thesis, if required) or certificate program. Example: ENGL 751 Amer. Novel in 20th Cent. Do not list courses not specifically required for the master's or certificate program. Note that any course on this program which exceeds the 6 year limit (before the degree is awarded) must be revalidated or replaced with another course.

| Dept Prefix | Course Number | Abbreviated Course Title | Term Completed | Year | Credit Hours | Grade | Where Taken |
|---|---|---|---|---|---|---|---|
| NURS | 701 | Intro Nursing Practice and Theory | | | 3 | | USC Columbia |
| NURS | 709 | Patho Concepts for Nursing Practice | | | 3 | | USC Columbia |
| NURS | 711 | Pharm for Nursing Practice | | | 3 | | USC Columbia |
| NURS | 712 | Health Assessment for Nursing Practice | | | 3 | | USC Columbia |
| NURS | 713 | Nursing Practice Fundamentals | | | 5 | | USC Columbia |
| NURS | 716 | Maternal, Newborn, and Pediatric Nursing | | | 6 | | USC Columbia |
| NURS | 721 | Gerontological Nursing Care | | | 2 | | USC Columbia |
| NURS | 723 | Medical Surgical Nursing Practice I | | | 5 | | USC Columbia |
| NURS | 729 | Psychiatric Nursing Practice | | | 4 | | USC Columbia |
| NURS | 730 | Population Health Nursing | | | 3 | | USC Columbia |
| NURS | 745 | Nursing Ethics, Policy & Advocacy | | | 3 | | USC Columbia |
| NURS | 726 | Medical Surgical Nursing Practice II | | | 5 | | USC Columbia |
| NURS | 750 | Transition to Nursing Practice I | | | 3 | | USC Columbia |

## Approval Signatures

**Student** Date

**Graduate Director of Program or School** Date

**Major Professor** Date

**Dean of the Graduate School** Date

THE GRADUATE SCHOOL South Carolina



## Master's Degree or Certificate Program of Study

| Dept Prefix | Course Number | Abbreviated Course Title | Term Completed | Year | Credit Hours | Grade | Where Taken |
|---|---|---|---|---|---|---|---|
| NURS | 789 | Stat & Resch Methods for Nrsing | | | 3 | | USC Columbia |
| NURS | 746 | Informatics, Technology, and Emerging Issues | | | 3 | | USC Columbia |
| NURS | 791 | Seminar in Clinical Nursing Research | | | 3 | | USC Columbia |
| NURS | 747 | Leadership and Safety for Nursing Practice | | | 3 | | USC Columbia |
| NURS | 748 | Care Coordination and Outcomes Management | | | 3 | | USC Columbia |
| NURS | 751 | Transition to Nursing Practice II | | | 5 | | USC Columbia |
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### Approval Signatures

******BOTH PAGES MUST BE SIGNED IF COURSEWORK EXTENDS TO SECOND PAGE*******

**Student** Date

**Graduate Director of Program or School** Date

**Major Professor** Date

**Dean of the Graduate School** Date

Print Form