

UNIVERSITY OF HOUSTON
COLLEGE OF NURSING
MASTER OF SCIENCE IN NURSING DEGREE PLAN

NAME: _____
 STUDENT NUMBER: _____
 CATALOG YEAR: 2022-2023
 DATE OF ADMISSION: _____
 CONDITIONS OF ADMISSION: _____

FOR OFFICE USE ONLY	
G.P.A.	
GRE	
MAT	
Personal Essay	
Recommendations	
Interview	

IN SIGNING THIS DEGREE PLAN, I ACKNOWLEDGE THAT I AM AWARE OF AND WILL BE BOUND BY THE FOLLOWING POLICIES:

- **I am familiar** with the mission of this program and will comply with the expectations outlined in the university catalog, new student orientation, and student handbook.
- **I am responsible** for maintaining high standards of academic honesty and ethical behavior as outlined on my course syllabi and in the student handbook and will be sanctioned for falling below these standards.
- **I will receive** a photocopy of my official degree plan with all signatures that I may use to track my own progress in the program. Should I have questions about my enrollment, I am responsible for contacting my advisor to resolve these questions.
- **I am responsible** for verifying that I have completed the appropriate prerequisites for my courses, and I understand that my instructors have the discretion to administratively withdraw me from their courses should they discover that I have not completed the prerequisites. In this event, I will have no recourse and will not be eligible for a refund of tuition and fees associated with the course.
- **I must have** a grade point average of 3.0 or higher in order to satisfy graduation requirements.
- **I am responsible** for complying with College of Nursing policies, registration deadlines, financial aid deadlines, and tuition and fees deadlines.
- **I am responsible** for applying for graduation by the published deadline for the semester in which I will complete degree requirements.
- **Should I discontinue my enrollment** at UH for 9 or more consecutive months for reasons other than involuntary military service, this degree plan will be invalid and a new degree plan complying with the current academic year's catalog must be filed.
- **Should degree requirements change** during my enrollment, at the discretion of the dean I may be required to comply with these changes provided that they will not appreciably increase the total credits I must complete to graduate.
- **I am responsible** for visiting the College of Nursing web page (www.uh.edu/nursing) regularly for important updates, and for ensuring that the College of Nursing has correct contact information for me at all times.

This document is official only when it bears all signatures. The student is responsible for fulfilling all requirements of this degree plan.

CONCENTRATION

Nurse Administration

(Additional course work may be taken for Nurse Education Certificate)

Student Signature	Date	Dean, College of Nursing	Date
Faculty Advisor	Date	Institutional Validation (Registrar)	Date

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	Courses/ Subs	Hrs. req'd	Semester/ Date	COMPLETED			Prerequisites, restrictions and/or remarks
				Transfer	UH	Total	
MSN REQUIRED COURSES	NURS 6301	3					NURS 6332
	NURS 6306	3					
	NURS 6320	3					Concurrent enrollment in NURS 6306
	NURS 6332	3					
	NURS 6333	3					
	NURS 6351	3					NURS 6301, NURS 6332, Capstone course final semester of MSN program. Student must have a 3.0 GPA in MSN program to take this course
ACADEMIC CONCENTRATION	Nurse Administration						
	NURS 6309	3					Credit for or concurrent enrollment in NURS 6306 or NURS 6307
	NURS 6316	3					Concurrent enrollment on NURS 6306
	NURS 6317	3					
	NURS 6318	3					Concurrent enrollment in NURS 6306
	NURS 6319	3					
	NURS 6321	3					NURS 6309, NURS 6316, NURS 6318, and NURS 6319
	Total Sem. Hrs.	36					
	Additional hours of coursework for Nurse Education Certificate (not required to complete MSN degree requirements for graduation)						
	NURS 6312	3					NURS 6301 or NURS 6332
NURS 6313	3					NURS 6306	
NURS 6314	3					NURS 6306	