

**Doctorate in Agricultural and Extension Education
Progress to Graduate Degree Form**

Please complete, sign and submit this form to the Graduate Assistant, 114 Ferguson, by the end of the first week of every semester, summarizing the progress made to the end of the previous semester. Full-time students please attach your Professional Experiences.

Last Name: _____ **First Name:** _____
(please print) (please print)

PSU ID: _____ **First Semester Enrolled at Penn State:** _____

The information on this form is correct. I expect to complete my Agricultural and Extension degree requirements by the end of:

Spring _____ Summer _____ Fall _____ 20 _____

Student Signature: _____ **Date:** _____

English Competency/Proficiency

_____ **Exam not required** _____ **Pass** _____ **Coursework in Progress**

None of the above
(explanation) _____

Coursework:

Please put the course number (AEE/YFE ***) if not listed, semester taken, instructor, number of credits and grade. Also, list the courses you will take this semester:

Doctorate students must successfully complete the three (3) prescribed courses listed below.

Program Required Courses	Semester	Grade	Instructor
AEE 501 (3)			
AEE 590 (2)			
English 511 (3) or English 418 (3)			

AEE Core Requirements – 3 credits in each core area: total of 15 credits at the 500-level or above.

AEE Core Requirements	Course Number	Semester	Credits	Grade	Instructor
Educational Processes					
Communications/ Leadership Development					
Program Development and Evaluation					
Research					

Additional Requirements	Course Number	Semester	Credit	Grade	Instructor
Additional Research Course (3 credits)					
AEE 600/610 (max 12 credits)					

Degree Credit Total	Semester Completed
Minimum 75 Credits (master's course count towards this) (maximum of 12 credits of AEE 600/610)	
Minimum or 18 credits at the 500-level or above	

Additional Credits	Semester	Grade	Credits	Instructor

Courses 500 level or above	Grade	Credits
Total (> or = 18 credits)		

Total Credits Completed to Date	
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Courses for this Semester	Instructor

Members of Dissertation Committee:

Advisor	Member	Member	Member	Outside Member

Date Thesis Committee was Formed: _____ Date form submitted to Office: _____

PhD Candidacy:

Please put the date of the exam if you have passed the exam or the number of attempts if you have not yet passed: _____ Date copy on file with the department: _____

Comprehensive Exam

Date of Request for Comprehensive Exam form _____ (3 weeks prior to exam)

Date of exam: _____ Outcome (pass/retake/fail) _____

Date copy of file with the department: _____

Publications, Proceedings, or Abstracts

List any papers on which you are first author or co-author. The venue is the journal, proceedings or book in which the work is published. Please submit copy of article to the department.

Title	First Author or Co-author	Date	Venue	Submitted/ Accepted	Copy submitted to department

Dissertation Defense

Date of Request for Oral Defense Exam form _____ (3 weeks prior to exam)

Date of exam: _____ Outcome (pass/retake/fail) _____

Title of Dissertation: _____

Work and Residence Record

In residence --- **R** if you were on campus and registered as a student
 L if on leave
 E if a full-time University employee

Support --- **GA** Graduate Assistance
 FS Fellowship
 SC Scholarship
 NONE if unsupported by PSU
 OTHER

Semester	In Residence	Number of Credits	Support

Advisor completes this section.

I have reviewed the information provided by the student and find the progress toward degree completion is:

 ___ **SATISFACTORY** ___ **UNSATISFACTORY**

Advisor Name (please print): _____

Advisor Signature: _____

If Unsatisfactory why and plan of action (attach separate sheet if necessary): _____

Graduation Check-Out: ___ **Approved** ___ **Unapproved**

Graduate Program Coordinator Signature: _____