**Peace and Conflict Studies**

**Post Baccalaureate Certificate (PBC)**

**Plan of Study**

This form may be initial or final. With your adviser, you should fill out this study plan **prior to starting the program and enrolling in classes**. This will help plan the number of courses you will need to complete your goals and graduate on time. You and your adviser will revisit/update this plan every semester before registration. K**eep a copy** for yourself and **send a copy** to the department for your file. Inform your adviser of any changes (e.g., drop classes) as it may affect graduation.

A final Plan of Study will be due to the Graduate School the semester you make the request to graduate. The Graduate School requires all signatures (as listed below) be included. It is the student’s responsibility to submit the final plan of study to the Graduate School.

## Student Name: ID#:

Start date (semester/year): Projected Graduation (semester/year):

Preliminary or final plan for graduation:

**Required Courses**

|  |  |
| --- | --- |
| PCS 600, Fundamentals of Conflict Transformation and Peace Studies | Fall: |
| PCS 605, Skills & Techniques of Conflict Management | Fall: |
| PCS 607, Conflict Analysis: Theories of Change | Spring: |
| PCS 608, Special Topics in Peace & Conflict Studies | Fall: |

**Final Course / Integrative Project\***

|  |  |
| --- | --- |
| **Project Name** | **Faculty mentor** |
|  |  |

**\*PBC students must complete an integrative project in their final course. Consult with academic advisor and course instructor**

**in the first week of class to confirm assignment and submission details for graduation. \***

**Transfer Courses/Credits (maximum 4 s.h.). Students must complete a transfer credit request form. Final grades must be a B or better to be considered. An official transcript must be on file with the Graduate School. Consult current Graduate bulletin for more information.**

|  |  |  |
| --- | --- | --- |
| **Course Prefix, #, and Title** | **Official transcript on file?** | **Transfer credit request form on file?** |
|  |  |  |
|  |  |  |

**Student Signature:**

**Date:**

**Academic Adviser Signature:**

**Date: \_**

**Dir. of Graduate Studies Approval (Final only):**

**Date: \_**

**Dept. Chair Approval (Final only):**

**Date:**