

The Plan of Study (POS) should consist of graduate coursework not older than 5 years at the time of approval. In some cases, graduate coursework older than 5 years can be justified and may be included on the POS. Justification for inclusion of such coursework should be assessed by the advisor with the support of the student's entire Advisory Committee. The Course Justification process represents an evaluation of the student's currency in the subject matter relevant to the pursuit of one's graduate degree.

STUDENT'S NAME _____

STUDENT'S DEGREE/MAJOR _____

LAST 4 DIGITS OF ID NUMBER _____

 REASON FOR SUBMISSION: Readmission Plan of Study Approval (initial) Plan of Study Approval (additional degree) Other: _____

COURSE NUMBERS	TITLES OF COURSES TO BE JUSTIFIED	YEAR COURSE WAS TAKEN

 Check here if additional courses are to be justified and list in Table 1 on the continuation page

Check all that apply and attach required documentation to this form:

RATIONALE	REQUIRED DOCUMENTATION
<input type="checkbox"/> Student is working in the field	CV OR RESUME WITH RELEVANT PROFESSIONAL EXPERIENCE HIGHLIGHTED
<input type="checkbox"/> Student received professional certification within past 5 years from a nationally recognized organization	CV/RESUME OR COPY OF EACH CERTIFICATE
<input type="checkbox"/> Related advanced courses on the Plan of Study require subject matter currency on the old course work	COMPLETE TABLE 2 ON CONTINUATION PAGE
<input type="checkbox"/> Student will be tested on written Preliminary Examination covering this subject matter	EXAM DATE:
<input type="checkbox"/> Other:	DETAILED EXPLANATION: rEA

By signing below, all faculty Committee members and Department Head or authorized faculty Graduate Program Director attest that the student noted above has remained current in the body of knowledge for all courses more than 5 years old that are included on the Plan of Study and that the student's full Committee has thoroughly assessed the student's currency in the subject matter via one or more of the Graduate School approved Justification strategies.

Advisory Committee Signatures (Required of ALL Committee Members)

Committee Chair signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
signature	printed name	e-mail (@vt.edu, preferred)	date
DEPARTMENT HEAD signature or authorized GRADUATE PROGRAM DIRECTOR	printed name	e-mail (@vt.edu, preferred)	date

GRADUATE SCHOOL DEAN signature _____ date _____

STUDENT INFORMATION

SIGNA-

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 STUDENT'S NAME

 STUDENT'S DEGREE/MAJOR

 LAST 4 DIGITS OF ID NUMBER

Table 1: Additional courses to be justified

COURSE NUMBERS	TITLES OF COURSES TO BE JUSTIFIED	YEAR COURSE WAS TAKEN

Table 2: Comparison of old and current courses

OLD COURSE NUMBER AND CONTENT	ADVANCED-LEVEL COURSE NUMBER AND TITLE ON PLAN OF STUDY

STUDENT INFORMATION

SIGNA-

 Return your completed form to:
Graduate School
 232 Graduate Life Center
 at Donaldson Brown
 Virginia Tech (0325)
 Blacksburg, VA 24061
 Fax: 540/231-1670