

PH.D. IN BIOSTATISTICS PLAN OF STUDY PUBLIC HEALTH SPECIALIZATION

This form should be submitted to the Graduate Studies Committee within four quarters following the passing of Qualifying Exam II and before the Candidacy Exam. Indicate your grade in the following required courses or when you plan to taken them. Use a W to indicate a waived course.

Name: _____ **OSU Name.#** _____ **Date:** _____

Mark courses with asterisk (*) if included in master's degree credit (maximum 45 hours).

Core Course Requirements: (77 hours)

Course	Hrs	Grade	Qtr/Yr		Course	Hrs	Grade	Qtr/Yr
BIOSTAT 605 / PUBHBIO 605	4	_____	_____		BIOSTAT 615	3	_____	_____
PUBHBIO 606	4	_____	_____		PUBHBIO 651 / STAT 651	4	_____	_____
PUBHBIO 652 / STAT 652	4	_____	_____		PUBHBIO 701	4	_____	_____
PUBHBIO 702	4	_____	_____		PUBHBIO 703	4	_____	_____
PUBHBIO 706	4	_____	_____		PUBHBIO 726 / STAT 726	4	_____	_____
PUBHEPI 710	4	_____	_____		STAT 620	4	_____	_____
STAT 621	4	_____	_____		STAT 622	4	_____	_____
STAT 641	5	_____	_____		STAT 645	5	_____	_____
STAT 743	3	_____	_____		STAT 773	3	_____	_____
STAT 833	3	_____	_____					
PUBHBIO 786	3	_____	_____	OR	STAT 600	2	_____	_____
					and			
					BIOSTAT 709	1	_____	_____

Total hours: _____

Electives: (13 hours required): As approved by the student's PhD Examination Committee, elective courses are generally at the 700 level and above in Statistics, Biostatistics, or Public Health with an additional course at the 500 level or above in a biomedical scientific area of application.

Course	Hrs	Grade	Qtr/Yr		Course	Hrs	Grade	Qtr/Yr
_____	—	_____	_____		_____	—	_____	_____
_____	—	_____	_____		_____	—	_____	_____
_____	—	_____	_____		_____	—	_____	_____
_____	—	_____	_____		_____	—	_____	_____

Total hours: _____

Summary: (120 hours minimum)

Area	Credit Hours
Core Courses	
Electives	
Dissertation credits (799,999, etc.)	
Total (minimum 120 quarter hrs)	

Projected Date of PhD Candidacy Examination: _____

Student's signature

Having met on _____, the undersigned approve the listed program and agree to serve on the PhD Candidacy Examination Committee.

Examination Committee Chairperson _____
Print name Signature

Examination Committee Member _____
Print name Signature

Examination Committee Member _____
Print name Signature

Examination Committee Member _____
Print name Signature

Approved by: _____
Graduate Studies Committee Chairperson

Date: _____