Reset Form

EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES
Program of Study for the Master's Degree

Office Use Only
Input on SIS:_____
Initials:_____
Catalog of Record:_____

Name:_____ _____
Student's Name (please type or print) Identification Number

Field of Study: Nursing Concentration: Administration

(Please Type or Print)

Course ID Number	Course Title	Grade	Credit Hours	Semester Completed or to be Completed	Transfer * Credit	Substitute For Course #	**Office Use Only**
ALNU 5021	Case Management		2				
PMNU 5000	Conceptual Systems for Advanced Nsg Pract		2				
PMNU 5001	Nursing Research		3				
PMNU 5002	Policy & Ethics in Advanced Practice Nsg		3				
PMNU 5017	Health Care Informatics		3				
PMNU 5501	Leadership in Nursing Administration		1				
PMNU 5510	Organizational Theory		3				
PMNU 5520	Fiscal Management in Nursing Administration		3				
PMNU 5530	Health Care Organizations & Law		3				
PMNU 5535	Quality Management in Hlth Care Org		3				
PMNU 5550	Human Resource Management		3				
PMNU 5560	Nursing Administration Practicum I		2				
PMNU 5570	Nursing Administration Practicum II		2				
PMNU 5590	Strategic Planning for Health Care		3				
Total number of hours required for degree----------			36				

* Non-ETSU transfer credit must be approved before it can be shown on the program of study.

Student's Signature:_____ Date:_____

Approved:_____ Date:_____
Advisory Committee Chair

Approved:_____ Date:_____
Graduate Program Coordinator

Approved:_____ Date:_____
Additional signature(s) if required by program

Updated 6/22/05