

# UP SCHOOL OF STATISTICS

## Proposed Plan of Study

Name:

Student No.:

Degree Program:

Academic Year	1 <sup>st</sup> Sem	Units	2 <sup>nd</sup> Sem	Units	Midyear	Units
	Total Units		Total Units		Total Units	

Academic Year	1 <sup>st</sup> Sem	Units	2 <sup>nd</sup> Sem	Units	Midyear	Units
	Total Units		Total Units		Total Units	

Academic Year	1 <sup>st</sup> Sem	Units	2 <sup>nd</sup> Sem	Units	Midyear	Units
	Total Units		Total Units		Total Units	

(Please delete or add tables as needed)

Preferred electives:

Current GWA:

*To be filled out the Student Records Evaluator:*

End of MRR:

If applicable, no. of MRR extensions:

End of 1st MRR Extension:

End of 2nd MRR Extension:

End of 3rd MRR Extension:

Notable deficiencies:

*To be filled out by the Director of Graduate Studies:*

Special remarks on the proposed plan of study:

Endorsed by:

<Name of Program Adviser or Director>

Program Adviser or Director of Graduate Studies