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| **Student’s Name:** | **NAU ID:** |
| **E-mail Address:**      @nau.edu | **Phone Number:** |
| **Enrollment Term:**        (ex. Summer 2016) | **Expected Graduation:**       (ex. Spring 2018) |
| **Advisor:** | |
| **Total Required Credits for this Degree Program:** **71** | |
| **This is the:**  **Initial** (upon admission)  **Final** (submitted with Graduation Application) **Program of Study** | |

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Hours** | **Grade** | **T/E/P\*\*** |
| 1. **Required Core Courses (66 units required):** | | | | | | | | |
| \* | NUR 510 | Theoretical Foundations |  |  |  |  |  |  |
| \* | NUR 520 | Applied Pathophysiology for Apns  *Co-req.: NUR 540* |  |  |  |  |  |  |
| \* | NUR 530 | Advanced Principles of Evidence-based Practice  *Pre-req.: NUR 510* |  |  |  |  |  |  |
| \* | NUR 540 | Pharmacology for Advanced Practice Nurses  *Co-req.: NUR 520* |  |  |  |  |  |  |
| \* | NUR 560 | Rural Theory and Health Policy |  |  |  |  |  |  |
| \* | NUR 650 | Advanced Nursing Assessment  *Co-req.: NUR 520* |  |  |  |  |  |  |
| \* | NUR 660 | Family Primary Health Care I  *Pre-req.: NUR 510, NUR 520, NUR 530, NUR 540, NUR 550, NUR 560, NUR 650, NUR 675, NUR 676; Co-req.: NUR 661* |  |  |  |  |  |  |
| \* | NUR 661 | Family Primary Health Care Practicum I  *Pre-req.: NUR 510, NUR 520, NUR 530, NUR 540, NUR 550, NUR 560, NUR 650, NUR 675, NUR 676; Co-req.: NUR 660* |  |  |  |  |  |  |
| \* | NUR 662 | Family Primary Health Care II  *Pre-req.: NUR 660, NUR 661; Co-req.: NUR 663* |  |  |  |  |  |  |

Student’s Name:       NAU ID:

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Hours** | **Grade** | **T/E/P\*\*** |
| \* | NUR 663 | Family Primary Health Care Practicum II  *Pre-req.: NUR 660 and 661; Co-req.: NUR 662* |  |  |  |  |  |  |
| \* | NUR 664 | Family Primary Health Care III  *Pre-req.: NUR 662, NUR 663; Co-req.: NUR 665* |  |  |  |  |  |  |
| \* | NUR 665 | Family Primary Health Care Practicum III  *Pre-req.: NUR 662 and NUR 663; Co-req.: NUR 664* |  |  |  |  |  |  |
| \* | NUR 675 | Advanced Roles Transition |  |  |  |  |  |  |
| \* | NUR 677 | Methods for Evidence-Based Practice |  |  |  |  |  |  |
| \* | NUR 700 | Introduction to Doctor of Nursing Practice |  |  |  |  |  |  |
| \* | NUR 701 | Healthcare and Policy for Advanced Practice Nursing  *Pre- or Co-req.: NUR 700* |  |  |  |  |  |  |
| \* | NUR 703 | Doctor of Nursing Practice Clinical Immersion |  |  |  |  |  |  |
| \* | NUR 705 | Leadership for Advanced Practice Nurses in Clinical Practice |  |  |  |  |  |  |
| \* | NUR 712 | Evidence-Based Practice: Project Planning and Implementation  *Pre-req.: NUR 677* |  |  |  |  |  |  |
| \* | NUR 714 | Health and Vulnerable Populations  *Pre-req.: NUR 700* |  |  |  |  |  |  |
| \* | NUR 716 | Organizations and Systems Leadership for Quality Care  *Pre-req.: NUR 700* |  |  |  |  |  |  |
| 1. **Scholarly Inquiry (5 units required)** | | | | | | | | |
| \* | NUR 704 | Evidence Based Practice: Project Evaluation  *Pre-req.: NUR 677, NUR 712* |  |  |  |  |  |  |
| \* | NUR 706 | Evidence Based Practice: Dissemination  *Pre-req.: NUR 712* |  |  |  |  |  |  |

Student’s Name:       NAU ID:

**ADDITIONAL INFORMATION**

Instructions for Transfer Credits: For any courses that will be replaced with approved transfer credits from another university, please type “University Course Number” in the “Replacement Course” column for that course and attach a copy of your approved and signed Transfer Credit Form. If the transfer credit does not directly replace the NAU course, please list these courses and their corresponding information in the blank rows at the bottom of Section I, leaving the “Replacement Course” column blank for these courses.

This degree is a clinical doctorate with emphasis on leadership expertise. One thousand hours (1,000) of clinical practice with a minimum of 240 hours completed at NAU is required. The summative outcome is a DNP project that demonstrates the integration and translation of evidence based practice to enhance clinical practice, which includes an oral defense.

In addition to all University and Graduate College policies, procedures, and requirements, graduate students must also adhere to the academic requirements, policies, procedures, and criteria outlined by their program’s Graduate Student Handbook.

**Students:**

You must secure official approval by your advisor and Department Chair/Director before submitting the final Program of Study.

By signing or entering your name below, you agree to the following statement:

*“Students are responsible for complete knowledge of Academic Catalog requirements in their degree plan for their catalog year and adhering to all policies in the Academic Catalog.”*

**Advisors and Chairs/Directors:**

Please indicate approval of the curriculum on the Program of Study by placing your signature (electronic signatures are permitted) in the space provided.

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| **Student:** | **Date:** |
| **Advisor:** | **Date:** |
| **Chair** (required for Final)**:** | **Date:** |

**\*\*Transfer/Equivalent/Previous Graduate Degree** – Must have Advisor approval

Transfer T = Course transferred from another university

Previous Graduate Degree P = Course taken at NAU from previous graduate degree

Equivalent E = Course taken at NAU in place of required course

Internal Transfer I = Graduate level course taken as undergraduate; Not applied to undergraduate degree

**Transfer Credit Example:**

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Hours** | **Grade** | **T/E/P\*\*** |
|  | **ABC 123** | **Fundamentals of English** | **ASU 456** | **Fall** | **2012** | **3** | **A** | **T/ASU** |