**STUDENT INFORMATION**

|  |  |
| --- | --- |
| **Name:** | **NAU ID:** |
| **NAU E-mail Address:** | **Phone Number:** |
| **Term of Admission:** | **Expected Graduation Term/Year:** |
| **Advisor:** | **Required Credits for Degree Program: 48** |

I. **Core Courses (30 units required):**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/P/I/A\*\*** |
| HS 501 | Introduction to Public Health |  |  |  |  |  |  |
| HS 503 | Principles of Biostatistics |  |  |  |  |  |  |
| HS 505 | Advanced Behavior Change Counseling |  |  |  |  |  |  |
| HS 509 | Intervention Mapping |  |  |  |  |  |  |
| HS 511 | Health Policy and Management |  |  |  |  |  |  |
| HS 572 | Environmental and Occupational Health |  |  |  |  |  |  |
| HS 584 | Social and Structural Determinates of Health |  |  |  |  |  |  |
| HS 612 | Public Health Epidemiology |  |  |  |  |  |  |
| HS 618 | Chronic Disease Epidemiology and Prevention |  |  |  |  |  |  |
| HS 622 | Research Methods and Program Evaluation |  |  |  |  |  |  |
| HS 676 | Innovations In Healthcare And Public Health |  |  |  |  |  |  |

**II. Select from:**

* **Flagstaff Mountain Campus (6 units required): HS 608, HS698**
* **Online (6 units required): HS 609**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/P/I/A\*\*** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**III. Additional Coursework: (12 units required):**

* + Select from AIS 450, AIS 480, AIS 503, AIS 504, AIS 590, POS 590, ANT 521, ANT 580, ANT 599- Global Health, ANT 599- Health Scholars, COM 540, COM 542, COM 545, CST 475/575, CTE 550, CTE 670, EPS 590, ES 600, FW 405, GSP 545, INF 599-Infectious Disease Ecology and Epidemiology, (NTS 407 or NTS 507), (NTS 425 or NTS 525), NTS 415, NTS 445, NTS 520, NTS 550, (NTS 607 and NTS 607L), NTS 630, NTS 650, NUR 560, PHY 623, PSY 636, SOC 515, SUS 601, SUS 602, SUS 603.
    - You may also choose the Indigenous Health Track, in which the following must be completed: HS 561, HS 624, HS 671, AIS 503, or POS 503. This coursework is not available online.
    - Additional coursework approved in consultation with your advisor.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/P/I/A\*\*** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Additional InformatION:**

You may take a maximum of two 400-level courses (6 units) at Northern Arizona University as part of the Master of Public Health program.

You may not pursue the Public Health Certificate in conjunction with this degree.

This Program of Study documents your progress on your academic requirements for the degree and catalog year listed above. For Department of Defense-related requirements, it serves as the evaluated and approved educational plan.

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 (formal digital signatures are permitted) in the space provided.

|  |  |
| --- | --- |
| **Student:** | **Date:** |
| **Advisor:** | **Date:** |
| **Chair:** | **Date:** |

**\*\*Transfer/Previous Graduate Degree/Internal Transfer/Accelerated (T/P/I/A)** – Must have Advisor approval

Transfer T = Course transferred from another university

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

Internal Transfer I = Graduate level course taken as undergraduate; Not applied to undergraduate degree Accelerated Program “Dual-use” A = Courses completed during the undergraduate career and used to satisfy both the Bachelors and Master’s degree requirements. ONLY for designated Accelerated students.