

NORTHERN ILLINOIS UNIVERSITY
School of Nursing
Post-Masters Doctor of Nursing Practice
Fall Admit Full-Time

Student Name (Print/Type):

Z-ID :

Date:

Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS701 Leadership	3	NURS702 DNP	3	Cognate Elective	3
NURS704 Clinical Prevention	3	Research			
NURS 705 Ethics	2	NURS 706 Informatics	3		
		UHHS740 Health Studies Data Analysis	3		
Total Credits =		Total Credits =		Total Credits =	
8		9		3	
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 710 Seminar I	3	NURS 720 Seminar II	3		
NURS 713 Clinical I	2-3	NURS 723 Clinical II	2-3		
Total Credits =		Total Credits =		Total Credits =	
5-6		5-6			
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 730 Seminar III	3				
NURS 733 Clinical III	2-3				
Total Credits =		Total Credits =		Total Credits =	
5-6					

Student Signature & Date:

Graduate Advisor Signature & Date:

Director of Nursing Graduate Studies Signature & Date:

NORTHERN ILLINOIS UNIVERSITY
School of Nursing
Post-Masters Doctor of Nursing Practice
Fall Admit Part-Time

Student Name (Print/Type):

Z-ID :

Date:

Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS701 Leadership	3	NURS702 DNP	3	NURS 706 Informatics	3
NURS704 Clinical Prevention	3	Research UHHS740 Health Studies Data Analysis	3		
Total Credits =		Total Credits =		Total Credits =	
6		6		3	
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 705 Ethics	2	NURS 710 Seminar I	3		
Cognate Elective	3	NURS 713 Clinical I	2-3		
Total Credits =		Total Credits =		Total Credits =	
5		5-6			
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 720 Seminar II	3	NURS 730 Seminar III	3		
NURS 723 Clinical II	2-3	NURS 733 Clinical III	2-3		
Total Credits =		Total Credits =		Total Credits =	
5-6		5-6			

Student Signature & Date:

Graduate Advisor Signature & Date:

Director of Nursing Graduate Studies Signature & Date:

NORTHERN ILLINOIS UNIVERSITY
School of Nursing and Health Studies
Post-Masters Doctor of Nursing Practice
NIU MS Graduates who have completed NURS 701, 704, 706
Fall Admit Part-Time

Student Name (Print/Type):

Z-ID :

Date:

Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 705	2	UHHS 740	3		
Cognate Elective	3	NURS 702	3		
Total Credits =		Total Credits =		Total Credits =	
5		6			
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 710 Seminar I	3	NURS 720 Seminar II	3		
NURS 713 Clinical I	2-3	NURS 723 Clinical II	2-3		
Total Credits =		Total Credits =		Total Credits =	
5-6		5-6			
Fall 20__		Spring 20__		Summer 20__	
<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>	<u>Course Number</u>	<u>Credits</u>
NURS 730 Seminar III	3				
NURS 733 Clinical III	2-3				
Total Credits =		Total Credits =		Total Credits =	
5-6					

Student Signature & Date:

Graduate Advisor Signature & Date:

Director of Nursing Graduate Studies Signature & Date: