



GRADUATE NURSING PROGRAM

15 CAMPUS DRIVE, POST OFFICE BOX 18399, NATCHEZ, MISSISSIPPI 39122, TELEPHONE: 601-304-4304; FAX 601-304-4378

Plan of Study Advisement Form – Doctor of Nurse Practice Option (DNP)- DNP Project (36 Credit Hours) - Form Must be Typed

Name: _____ ASU ID Number _____

Address: _____

City/State/Zip

Contacts: _____

Home Phone

Work Phone

Mobile Phone

E-mail

Entry Date: _____ Advisor: _____

Semester 1 (Fall I)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 700	Advanced Health Informatics (45)	3				
NU 701	Clinical Epidemiology (45)	3				
NU 702	Healthcare Quality Improvement (45)	3				
Semester 2 (Spring I)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 703	Advanced Health Systems, Theoretical Foundations, and Ethical Issues (45)	3				
NU 704	Population Health (45)	3				
NU 710A	DNP Project (60)	1				
Semester 3 (Summer I)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 705	Evidence-Based Practice, Theory, Design, & Method (45)	3				
NU 710B	DNP Project (180)	3				
Semester 4 (Fall II)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 706	Leadership in Health Systems (45)	3				
NU 707	Advanced Healthcare Policy & Politics (45)	3				
NU 710C	DNP Project (120)	2				
Semester 5 (Spring II)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 708	Business Management in Clinical Practice (45)	3				
NU 710D	DNP Project (180)	3				
TRANSFER COURSES (Maximum of 6 hours allowed with departmental approval)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
Total Credit Hours _____						
Total Quality Points _____						
Cum GPA _____						
Signature of Student _____			Signature of DGN Chairperson Signature of Assistant Vice President for Academic Program Support and Graduate Studies			
Signature of Advisor _____						
*9 Hours total/4 courses for DNP Project						