



GRADUATE NURSING PROGRAMS
 15 CAMPUS DRIVE, POST OFFICE BOX 18399, NATCHEZ, MISSISSIPPI 39122, TELEPHONE: 601-304-4304; FAX 601-304-4398

Plan of Study Advisement Form – Nurse Educator Option (34 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: _____

Fall 1- (11 hrs.)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 520	Graduate Nursing Seminar	1				
NU 521	Advanced Pathophysiology	3				
NU 522	Advanced Pharmacology	3				
NU 523	Advanced Health Assessment/Lab	4				
		11				
Spring 1- (10 hrs.)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 524	Theoretical Foundations in Nursing	3				
NU 525	Health Policy and Ethical Decision-Making	2				
NU 530	Foundations of Teaching and Learning	3				
NU 535	Nursing Education Technologies	2				
		10				
Summer 1- (6 hrs.)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 531	Curriculum Strategies & Roles in Nursing Education	3				
NU 532	Assessment & Evaluation in Nursing Education	3				
		6				
Fall 2- (7 hrs.)						
Course Number	Course Title	Credit Hours	Date to be Taken	Date Completed	Grade	Quality Points
NU 527	Evidence-Based Practice and Quality Improvement	3				
NU 533	Nurse Education Practicum (240)	4				
		7				
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 _____ CUM GPA _____						
Total Quality Points _____						
Signature of Student _____		_____ Signature of DGN Chairperson				
Signature of Advisor _____		_____ Signature of Assistant Vice President for Academic Program Support and Graduate Studies				