## The University of Alabama School of Social Work Doctoral Student Planning and Annual Review Form, page 1

| Student:                             | Date of Entry into Program/Deadline:      |                            |
|--------------------------------------|---|----------------------------|
| Advisor:                             | Date this form submitted/updated          | l:                         |
| CWID                                 |   |                            |
| I. Progress in completing course     | work (note dissertation hours on page 2). | Include the course name as |
| well. Required courses are listed by | y number.                                 |                            |

| Course  | Semester (planned/completion   | Grade    |
|---|--------------------------------|----------|
| Substantive (16 hours)                                |                                |          |
| 1. SW 600 Social Work and the Welfare State           |                                |          |
| 2. SW 601 Seminar in Doctoral Education (1            |                                |          |
| credit)   |                                |          |
| 3. SW 605 Social Work Education                       |                                |          |
| 4. SW 640 Conceptualizations of Practice              |                                |          |
| 5. SW 648 Special Topics or Special Topics            |                                |          |
| 6. SW 660 Independent Study or Special Topics         |                                |          |
| Research (15 hours)                                   |                                |          |
| 1. SW 620 Social Work Research                        |                                |          |
| 2. SW 621 Social Work Research II                     |                                |          |
| 3. SW 628 Research Practicum                          |                                |          |
| 4. SW 6_  |                                |          |
| 5. SW 6_  |                                |          |
| Minor (12 hours or more; note minor exam if           |                                |          |
| appropriate) Title:                                   |                                |          |
| 1.  |                                |          |
| 2.  |                                |          |
| 3.  |                                |          |
| 4.  |                                |          |
| Statistics (6–9 hours)                                |                                |          |
| 1.  |                                |          |
| 2.  |                                |          |
| 3.  |                                |          |
| MSW (12 hours) (list the courses you will take or the |                                |          |
| courses you are counting) 1.                          |                                |          |
| 2.  |                                |          |
| 3.  |                                |          |
| 4.  |                                |          |
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|   |                                |          |

II. Statistics

A. Date sequence completed or proficiency exam passed:

|       | Scho                        |  |                                   |                                 |
|-------|-----------------------------|--|-----------------------------------|---------------------------------|
| III.  | Minor                       |  |                                   |                                 |
|       |                             | e/Subject of minor:                                |                                   |                                 |
|       | B. Proje                    | ected completion/completion                        | n dates:                          |                                 |
| IV.   |                             | tration Area<br>a of Concentration:                |                                   |                                 |
|       | B. Cone                     | ncentration Committee Chair:                       | :                                 |                                 |
|       | C. Cone                     | ncentration Committee Memb                         | oers:                             |                                 |
|       | D. Proj                     | jected date/date of completic                      | on of area statement:             |                                 |
| V.    | _                           | ive Paper (if applies) e of Integrative Paper:     |                                   |                                 |
|       | B. Date                     | e/Projected date of integrati                      | ve paper approval:                |                                 |
| VI.   | _                           | hensive Examination<br>jected date/date of compreh | ensive examinations:              |                                 |
|       | B. Resi                     | sults. Practice:                                   | Policy:                           | Research:                       |
|       | C. Date                     | te of second sitting, if require                   | ed:                               |                                 |
|       | D. Resi                     | sults. Practice:                                   | Policy:                           | Research:                       |
|       | E. Initi                    | ial and date when Program D                        | Pirector is notified of Compr     | rehensive Examination result: _ |
| VII.  |                             | on to Candidacy<br>e Admission to Candidacy for    | <b>rm</b> signed by Committee mer | nbers and submitted             |
|       | B. Date                     | Plan of Study form complete                        | ed and attached to Admissio       | n to Candidacy form             |
| VIII. | <b>Disserta</b> t<br>A. Dis | ation<br>ssertation Chair:                         |                                   |                                 |
|       | —<br>В. Disa                | ssertation Committee:                              |                                   |                                 |
|       |                             |  |                                   | submittedApproved               |
|       |                             | ssertation hours completed (r                      |                                   |                                 |

B. Initial and date when Statistics Substitution form is completed and filed with the Graduate

| Ε. | Dissertation title:   |
|----|---|
| F. | Projected date/date of proposal defense: Results:                                   |
| G. | Projected date/date of dissertation defense: Results:                               |
|    |   |
| Н. | Date(s) of second defense or other review(s), if required:                          |
| I. | Initial and date when registrar is notified of <i>Dissertation Defense</i> results: |
|    |   |
| J. | Initial and date when Application for Graduation is filed:, abstract submitted:     |

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## IX. Assistantships. If you have held any assistantships, complete the following table.

| lentify the assistantship (type, course or brief description of research) | Faculty | Semester |
|---|---------|----------|
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X. Narrative. Reflect on this past academic year and briefly discuss your perception of your progress and your plans for completing your program.