Doctoral Residency Plan Form
Department of Educational Leadership and Policy Studies

Student's Name___________________________ Date: ______________

(A) Research and Writing
Form of Documentation Date of Activity

(B) Professional Service
Form of Documentation Date of Activity

(C) Teaching
Form of Documentation Date of Activity

(D) Development, Consultation, and Project Management
Form of Documentation Date of Activity
(E) General Professional Participation

Form of Documentation       Date of Activity

Residence Plan Approved (to be signed at advisory conference)

Signatures

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Dr. xxx, Chair

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Dr. xxx, Member

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Dr. xxx, Member

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Dr. xxx, Member

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Dr. xxx, Outside Member

Residence Plan Completed (to be signed before final dissertation defense)

Signatures

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Dr. xxx, Chair

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Dr. xxx, Member

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Dr. xxx, Member

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Dr. xxx, Member
Dr. xxx, Outside Member