**The Johns Hopkins University School of Nursing**

**Comprehensive Examination Application**

Note: This form must be completed by the student and advisor and submitted to the PhD Program Administrator at least 30 days prior to the scheduled examination time.

**I.** Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intended time for examination: \_\_\_\_\_January; \_\_\_\_\_June

**II**. List of course numbers and title of all required courses taken in program (coursework).

Indicate the semester/academic year you completed the courses pre-requisite for the Comprehensive Examination listed below:

|  |  |
| --- | --- |
| Course number and Title | Semester and Year of Completion |
| NR110.800 Philosophical Perspectives in Health |  |
| NR110.814 Scientific Perspectives in Nursing |  |
| NR110.809 Quantitative Research Design and Methods\* |  |
| NR110.815 Qualitative Research Design and Methods\*\* |  |
| NR110.816 Mixed Methods Research Design \*\* |  |
| PH140.621 Statistical Methods in Public Health I |  |
| PH140.622 Statistical Methods in Public Health II |  |
| PH140.623 Statistical Methods in Public Health III |  |

Student’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PhD Program Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

\*formerly NR110.809 Advanced Research Design I

\*\* formerly NR110.826 Advanced Research Design II