

**Institute for Public Health Genetics  
MPH Student Progress Form**

Student Name: \_\_\_\_\_ Date form completed by student: \_\_\_\_\_  
 Student Email: \_\_\_\_\_ Student Number: \_\_\_\_\_  
 Quarter Entered Program: \_\_\_\_\_ Faculty (or Thesis) advisor: \_\_\_\_\_

**MPH in Public Health Genetics (minimum 63 credits required)**

**MPH Core Courses (17 Credits):**

Course No.	Course Title	Quarter Planned	Quarter Completed	Cr.	Grade
EPI 511	Introduction to Epidemiology <i>OR EPI 512/513 Epidemiologic Methods</i>	_____	_____	_____	_____
BIOST 511	Medical Biometry I <i>OR BIOST 517 Applied Biostats I</i>	_____	_____	_____	_____
HSERV 511	Introduction to Health Services and Public Health	_____	_____	_____	_____
ENVH 511	Environmental Occupational Health <i>OR ENVH 517/570/577/584</i>	_____	_____	_____	_____
HSERV 510	Society and Health	_____	_____	_____	_____

*(Approved Substitute Courses)*

**PHG Core Courses (17 Credits):**

Course No.	Course Title:	Quarter Planned	Quarter Completed	Cr.	Grade
PHG 511	Genetic Epidemiology	_____	_____	_____	_____
PHG 512	Legal, Ethical and Social Issues in PHG	_____	_____	_____	_____
PHG 513	Pharmacogenetics and Toxicogenomics	_____	_____	_____	_____
PHG 521	Socio-Cultural Perspectives of PHG	_____	_____	_____	_____
PHG 522	Ethical Frameworks of PHG	_____	_____	_____	_____
OR		_____	_____	_____	_____
PHG 525	Public Commentary on Ethical Issues in PHG	_____	_____	_____	_____
PHG 523	Genetics and the Law	_____	_____	_____	_____
PHG 581	Intro to Genetic Services and Bioinformatics in PHG	_____	_____	_____	_____

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**Seminar, Practicum, Thesis Credits (Minimum of 18 Credits):**

PHG 580 PHG Seminar (6 quarters @ 1 credit per quarter)

\_\_\_\_\_

\_\_\_\_\_

Course No.	Course Title:	Quarter Planned	Quarter Completed	Credit Received?
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PHG 595 Master's Practicum (3 credits minimum)

\_\_\_\_\_

Practicum Agreement submitted?

Date: \_\_\_\_\_

Blood Borne Pathogen Training completed?

Date: \_\_\_\_\_

HIPAA Training completed?

Date: \_\_\_\_\_

Immunizations completed?

Date: \_\_\_\_\_

PHG 700 Master's Thesis (9 credits minimum)

\_\_\_\_\_

**Electives (Minimum 11 credits):**

Course No.	Course Title:	Approved?	Quarter Planned	Quarter Complete	Cr.	Grade
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_____	_____	<input type="checkbox"/>	_____	_____	_____	_____
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**Total Credits Planned:** \_\_\_\_\_

**Total Credits Completed:** \_\_\_\_\_

**Thesis Chair:** \_\_\_\_\_

**Committee Members:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APC thesis presentation scheduled?

**Presentation Date:** \_\_\_\_\_

**Advisor Comments:**

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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This form should be completed by each student during the Autumn Quarter of each academic year. The student should then meet with his/her advisor(s) to review, modify if needed, and approve his/her progress and plans for the academic year. Once finalized the student and his/her advisor sign the last page of the form. The student is responsible for filing the signed form with the IPHG office before the end of Autumn Quarter.