

**University of Washington  
Institute for Public Health Genetics  
Annual MPH Student Progress/Planning Form**

This form should be completed by each student (including on-leave students) during the autumn quarter of each academic year. The student should then meet with his/her advisor or thesis chair 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.

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)**

[Highly recommended courses]; *substitute courses*

**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 Biostatistics I</i>	_____	_____	_____	_____
HSERV511	Intro to Health Services & Public Health	_____	_____	_____	_____
ENVH 511	Environmental Occupational Health <i>OR ENVH 517/570/577/584</i>	_____	_____	_____	_____
HSERV 510	Society and Health	_____	_____	_____	_____

**PHG Core Courses (18 Credits):**

Course No.	Course Title:	_____	_____	_____	_____
PHG 511	Genetic Epidemiology	_____	_____	_____	_____
PHG 512	Legal, Ethical and Social Issues in PHG	_____	_____	_____	_____
PHG 513	Pharmacogenetics and Toxicogenomics	_____	_____	_____	_____

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**Students must select one of the 3-course combinations from the table below**

1	2	3	4	5	6	7
521	521	521	521	521	522	525
522	525	522	525	523	523	523
523	523	542	542	542	542	542

Course No.	Course Title:	Quarter Planned	Quarter Completed	Credit	Grade
PHG 521	Culture, Society, & Genomics	_____	_____	_____	_____
PHG 522	Ethical Frameworks in PHG	_____	_____	_____	_____
PHG 523	Genetics and the Law	_____	_____	_____	_____
PHG 525	Public Commentary on Ethical Issues in PHG	_____	_____	_____	_____
PHG 542	Genetic Discovery in Medicine & Public Health	_____	_____	_____	_____

**Interactive Seminar (6 Credits):**

PHG 580	PHG Seminar (6 quarters @ 1 credit per quarter)	_____	_____	_____	_____
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**Practicum & Thesis (Minimum 12 Credits):**

Course No.	Course Title:	Quarter Planned	Quarter Completed	Credit Received?
PHG 595	Master's Practicum (3 credits minimum)	_____	_____	<input type="checkbox"/>
PHG 700	Master's Thesis (9 credits minimum)	_____	_____	<input type="checkbox"/>

**Electives (Minimum 10 Credits):**

**(See MPH guidelines on the IPHG website for a complete list of approved MPH electives.)**

Course No.	Course Title:	Quarter Planned	Quarter Completed	Credit	Grade
[PHG 518	Computer Dem. in Genetic Epidemiology]	_____	_____	_____	_____
[PHG 519	Statistical Methods in Genetic Epidemiology]	_____	_____	_____	_____
[PHG 536	Bioinformatics & Gene Sequence Analysis]	_____	_____	_____	_____
[PHG 551	Human Genomics: Science, Ethics, & Society]	_____	_____	_____	_____
[PHG 552	Advanced Qualitative Methods]	_____	_____	_____	_____
[PHG 591	PHG Journal Club (1 credit per quarter)]	_____	_____	_____	_____

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<u>Electives (Continued):</u>	Approved?	Quarter Planned	Quarter Completed	Credit	Grade
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____
_____	<input type="checkbox"/>	_____	_____	_____	_____

**Total Credits Planned:**

**Total Credits Completed:**

**Practicum Learning Contract submitted? YES:  NO:**

**Date:**

**Thesis Committee:**

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

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

**APC thesis presentation scheduled? YES:  NO:**

**APC thesis presentation Date:**

**Advisor Comments:**

**Student Signature:**

**Date:**

\_\_\_\_\_  
**Advisor or Chair Signature:**

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