

Degree Plan

Master of Health Administration (MHA) 42 hours

Student: ____ Student ID:____ Email:____ Beginning Term<u>:</u> Goal to Graduate by____ Academic Advisor:



Degree Plan

Pathways

Actual schedules may vary based on start date and course availability

Full-Time Suggested Pathway/EAR 1

Term 1	Term 2	Term 3	Term 4	Term 5

YEAR 2

Term 1

Part-Time Suggested Pathway

YEAR 1

Term 1	Term 2	Term 3	Term 4	Term 5

YEAR2

Term 1	Term 2	Term 3	Term 4	Term 5

YEAR3

Term 1	Term 2	