## Graduate Center for Public Policy and Administration Master of Public Administration Degree Program Graduate Certificate in Public Sector Financial Management

Name:	Telephon	e:	Student ID:	
Address:		City/St :		Zip:
Email:	_	Semester of Advancemen	t:	

## REQUIRED COURSES: SATISFACTORY COMPLETION OF COURSES BELOW

Course	Title	Semester/Year	Professor	Grade	Units
PPA 555	Government Budgeting and Finance				3
PPA 560	Public Financial Management				3
PPA 567	Basic Governmental Accounting				3
PPA 590T	State and Local Public Finance				3
Acct 610	Managerial Accounting and Control				3
IS 601	Quantitative Methods for Managerial Decision Making				3

**Total Program Units: 18** 

Substitutions for required courses may be made with approval of program advisor:

Course Substitution	Title	Course Substitution	Title
Course Substitution	Title	Course Substitution	Title
roval (Signatures):			
Student:		Date:	
Faculty Advisor:		Date:	
Department Chair:		Date:	
Associate Dean, CHHS		Date:	