

Date: _____

Name: _____

ID #: _____

Bachelor of Science/Master of Science Thesis Program of Study

**** This form is due to the ME Graduate Advising Office (MEK 1568) 7 months prior to graduation.**

No more than 9 non-matriculated credits, 6 transfer credits, or 3 independent study (ME EN 6950) credits allowed. All courses must be graded B- or better. Attach additional copies of this form if more lines are needed.

30 TOTAL CREDIT HOURS

21 course credit hours

12 credit hours of ME EN courses:

_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.
_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.
_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.
_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.

9 credit hours of electives (courses in Math, Science and/or Engineering):

_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.
_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.
_____ Semester	_____ Course Name	_____ Course Number	_____ Grade	_____ Cr.

9 thesis research credit hours (ME EN 6975)

_____ Semester	<u>Masters Thesis</u> Course Name	<u>ME EN 6975</u> Course Number	_____ Grade	_____ Cr.
_____ Semester	<u>Masters Thesis</u> Course Name	<u>ME EN 6975</u> Course Number	_____ Grade	_____ Cr.
_____ Semester	<u>Masters Thesis</u> Course Name	<u>ME EN 6975</u> Course Number	_____ Grade	_____ Cr.

Supervisory Committee:

_____ Chair (Your advisor)	_____ Member 1 Name	_____ Member 2 Name
_____ <i>Chair Signature</i>	_____ <i>Member 1 Signature</i>	_____ <i>Member 2 Signature</i>

Graduation Semester: _____ Date of Defense: _____