

MS Thesis Program of Study

This form is due to the ME Graduate Advising Office by the second week of your last semester.

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. The courses on this Program of Study must have a GPA of 3.0 or higher. Attach additional copies of this form if more lines are needed.

NAME:						
STUDENT ID #:	STUDENT ID #:		_ E-MAIL:			
ANTICIPATED	GRADUATION SE	EMESTER:				
ourse credit hours						
credit hours of ME EN c	ourses					
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.	
Semester	Course Name		Course Number	Grade	Cr.	
Semester	Course Name		Course Number	Grade	Cr.	
Semester	Course Name		Course Number	Grade	Cr.	
sis research credit ho						
ninimum of 9 credit hour	rs of ME EN 6975 unde	er the supervision of	of your research a	dvisor are req	uired.	
ommittee Approval						
Chair Name (Your advisor)		per 1 Name		Member 2 N		
Chair Signature	Member 1 Signa		ure		Member 2 Signature	