MASTER'S DEGREE PLAN MASTER OF SCIENCE IN MECHANICAL ENGINEERING GRADUATE DIVISION – SMU-SCHOOL OF ENGINEERING

SMU ID #:		Name:					
Home Address:			Ho	me Phone:			
Business Address:			Bus	siness Phone:			
Major Department:			Are	a of Interest:			
Degree Sought:			Ma	jor:			
ARTICULATION COURSE(S)	Course	Title		Instructor	Hrs.	Semester	Grade
CORE COURSES							
ELECTIVES							
ELECTIVES							
		TOTAL HC	OURS (M	Minimum)		
APPROVED	Advisor / Date	isor / Date Department Head / Date					
		pirector of Graduate D	Division .	/ Date			