

**MASTER'S DEGREE PLAN
MAJOR IN APPLIED SCIENCE
GRADUATE DIVISION – SMU-LYLE SCHOOL OF ENGINEERING**

SMU ID #: _____ Name: _____

Home Address: _____ Home Phone: _____

Business Address: _____ Business Phone: _____

Area of Interest: _____

ARTICULATION COURSE(S)	Course Title	Instructor	Hrs.	Semester	Grade
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

CORE COURSES

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

ELECTIVES

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TOTAL HOURS (Minimum) _____

APPROVED _____
Advisor / Date
Department Head / Date

Director of Graduate Division / Date