

Study Plan for Master's in Civil Engineering

(Please type or print clearly)

Student

Name _____ Graduate Track _____

COURSEWORK (Place ^ next to "credit hours" for any course that was double-counted for BS/MS program.
Place * beside any course not taken at OSU; must be approved by advising committee):

TABLE A (must total at least 6 hours)		FINAL	
Course Number	Course Title	GRADE	Credit hours

TOTAL of TABLE A Credits: _____

TABLE B (must total at least 6 hours)		FINAL	
Course Number	Course Title	GRADE	Credit hours

TOTAL of TABLE B Credits: _____

MATH (must be at least 3 hours)		FINAL	
Course Number	Course Title	GRADE	Credit hours

TOTAL of MATH Credits: _____

BALANCE (Graduate-level courses approved by student's master's advisory committee)			
Course Number	Course Title	FINAL GRADE	Credit hours

TOTAL of BALANCE Course Credits: _____

THESIS Option Only - TOTAL Research Hours: _____

TOTAL MS HOURS: _____

MS Type:

_____ **Thesis Option**

(Tentative research thesis title: _____
_____)

_____ **Non-thesis Option** (This option requires a written exam of at least 4 hours;

if selecting the non-thesis option, have you ever held a GRA appointment at OSU? _____ Yes _____ No)

NOTE: MS Thesis degree requires at least 30 hrs (including at least 6 hrs of thesis research) and Non-thesis MS requires at least 33 hrs for coursework. For more details, please reference the CEGSP Graduate Handbook.

- Have you met the residency requirement? _____ (see *Graduate School Handbook: Section VI.1 > 6.1 General Information > Credit Hours and Residency Requirement*)
- BS/MS students: Total combined credit hours between BS and MS degree? _____ (must be at least 150)

Master's Advisory Committee Approval Signatures: (Composed of at least 3 members, including Advisor. Two members, including the Advisor must hold membership at Category M or P level in the Department of Civil, Environmental and Geodetic Engineering. Non-Graduate Faculty members must be approved by petition to the Graduate School on GradForms.)

Advisor Name _____ Signature _____ Date _____

Committee Member Name _____ Signature _____ Date _____

Committee Member Name _____ Signature _____ Date _____

Graduate Studies Committee Chair

Name: _____ Signature _____ Date _____



Please send to the Graduate Program Coordinator once the form is complete.