Plan of study-Masters- Mechanical Engineering (Non-Thesis Option)

Date: _____ Entry Semester _____

Name (Last, First Middle Initial): _____ LSUID #: _____

Area of interest: _____Anticipated Graduation Date: _____

Graduate work transferred (Hours, Courses, Title and Institution): _____

_____

Final GPA _____ (from previous University attended)

COURSE NUMBER	TITLE	CREDIT HOURS	DEPARTMENT	SEMESTER	YEAR	GRADE
	Seminar (If full time) Independent course/report	ME ME	7901 7903	1 3		
	Math					

Student's Signature: _____ Date: _____

Advisory Committee Members (print names) **Signatures of Advisory Committee Members** **Date**

1. Major Professor (Chair) _____

2. _____

3. _____

4. _____

_____

Graduate Advisor Date