PROGRAM OF STUDY FOR THE
MASTER OF SCIENCE DEGREE IN ENGINEERING SCIENCE

(Due by end of first semester for *new* LSU students. *ALL OTHERS*: due with application to Engineering Science Program; cannot be submitted in the same semester as the *Application for Master's Degree* and the *Request for Master's Exam*.)

Name_____ LSUID#_____

Baccalaureate Degree_____ _____ _____
University Discipline Month/Year earned

MS ES Entry Date_____ Expected Completion Date_____

_____Non-Thesis: 33 hrs + 3 hrs project with report & presentation _____Thesis: 24 hrs + 6 hrs thesis

Advisory Committee: (Major Advisor/Professor listed first)

Name (typed)	*Signature*	*Dept.*	*Grad. Faculty Status*** (Fill in space from choices below)

** Graduate Faculty Status is NOT academic rank (Professor, Assoc. Prof., Asst. Prof.); Visit the Graduate Faculty membership list on the Grad School website and choose from the following: **Full Member** (7 Yr or permanent); **Associate** (6 Yr or 3 Yr); **Research Affiliate**; or **Professional Affiliate**.

Proposed Interdisciplinary Graduate Course Work

- ***(½+ engr. courses, ½+ at 7000-level; at least two sub-areas; concentration requirements as applicable; 18 hours and one academic year in residence required AFTER admission to the ES program)***
- ***Thesis: 24 hrs. plus 6 thesis research; non-thesis: 36 hrs. including 3 hr. project crs***
- ***Transfer credits must be evaluated on a course by course basis***

List courses by area and formatted as shown in the table below:

Course Rubric	*Title (as it appears in catalog)*	*Credits*	*Semester*	*Grade*
BE 4323	*Biomechanics for Engineering*	*3*	*Spr 2010*	*Example*

Total Credits_____

ENGINEERING SCIENCE MAJOR AREA (Program of your major professor)
Circle applicable field: Biological & Agricultural, Civil, Computer, Construction Management, Electrical, Environmental, Industrial, Mechanical, Petroleum.

CONCENTRATION: <u>If applicable, requires additional approval as indicated below.</u>

( ) *Biological Engineering – BAEP*
Dr. Cristina Sabliov, Area Coordinator

_____ Date_____
(Signature)

( ) *Construction Management – CMP*
Dr. Marwa Hassan, Area Coordinator

_____ Date_____
(Signature)

( ) *Environmental and Technological Hazards Engineering – ETHEM*
( ) *Environmental and Technological Hazards Engineering – ETHEP*
Dr. William Moe, Area Coordinator

_____ Date_____
(Signature)

( ) *Information Technology and Engineering – ITEM*
( ) *Information Technology and Engineering – ITEP*
Dr. Gerry Knapp, Area Coordinator

_____ Date_____
(Signature)

( ) *Materials Science and Engineering – MSEM*
( ) *Materials Science and Engineering – MSEP*
Dr. Dorel Moldovan, Area Coordinator

_____ Date_____
(Signature)

_____ _____
(Signature of Student) (Date) Signature of Associate Dean for Academic Programs (Date)

PLEASE SUBMIT 1 TYPED ORIGINAL TO THE ENGINEERING SCIENCE OFFICE IN ROOM 2228X PATRICK F. TAYLOR HALL. *Rev. 02/05/2018*