WHETTEN GRADUATE CENTER | 438 WHITNEY ROAD EXTENSION, UNIT-1152, STORRS CT 06269-1152 TELEPHONE: (860) 486-3617 | FACSIMILE: (860) 486-6739 | GRAD.UCONN.EDU

PLAN OF STUDY FOR THE MASTER'S DEGREE

FIRST NAME			
LAST NAME			
STUDENT ID # (SEVEN DIGITS)	NETI	PHONE	
EMAIL			
DEGREE SOUGHT FIELD	OF STUDY		
AREA OF CONCENTRATION (IF ANY)			
 This plan of study should be su later than the beginning of the st work indicated on the plan of stu be signed below by the student a School. Any changes in listed co es in Plan of Study" form. 	tudent's final semester befor udy is a fundamental prerequ and each member of the advi sursework should be submitte	e degree completion. The isite for the conferring o sory committee before s	e successful completion of all f the degree. This form must ubmission to The Graduate
ADVISOR	'S NAME (PRINTED) 1 OF THREE REQUIRED	ORIGINAL SI	GNATURE REQUIRED
MAJOR ADVISOR			
ASSOCIATE ADVISOR			
ASSOCIATE ADVISOR			
ASSOCIATE ADVISOR			
ASSOCIATE ADVISOR			
DATE BY WHICH YOU EXPE			
*Formal application for graduation through the Student Administrat for conferral dates and deadlines	ion System before the confe		
	LEAVE BL	ANK	
DATE BY WHICH ALL REQUIREM	MENTS FOR THE DEGREE M	JST BE COMPLETED:	
PLAN A (TH	IESIS)	PLAN B (N	ION-THESIS)

Revised 06/11/2014 PAGE 1 OF 2

COURSE WORK

••••• The plan of study should be drawn up in consultation with your advisory committee. List in chronological order all courses that fulfill the requirements for the Master's degree.

<u>Plan A (Thesis)</u>: At least fifteen credits of appropriate course work, as well as a minimum of nine of GRAD 5950/5960 (formerly GRAD 395) Master's Thesis Research credits must be listed. Your advisory committee may require more than the minimum fifteen depending on the scope and quality of your preparation and objectives.

<u>Plan B (Non-Thesis)</u>: A minimum of twenty-four credits of appropriate course work must be listed. Your advisory committee may require more than the minimum twenty-four credits depending on the requirements of your field of study.

• Refer to the Graduate Catalog in regard to transfer credit courses and submit any request for transfer credits on the "Transfer Credit Request" form with advisor's approval signature and official transcript. Please retain a copy of the plan for your records.

List Courses in Chronological order						
COLLEGE	COURSE NUMBER	COURSE TITLE	COURSE CREDITS	LEAVE BLANK	YEAR	SEMESTER
EXAMPLE - U. OF CONNECTICUT	GRAD 5950	MASTER'S THESIS RESEARCH	3		2010	SPRING

*The Graduate School requires Master's degree students to maintain at least a B (3.00) cumulative grade point average.

If additional space is required to list coursework please attach another page

Uconn Credits Date	Transfer Credits Student's Signature	Total Credits
Revised 06/11/2014	Student's Signature	PAGE 2 OF 2