

**THE UNIVERSITY OF AKRON
DEPARTMENT OF ELECTRICAL AND COMPUTER ENGINEERING**

Master of Science Plan of Study Course List¹

Date: _____
(mm/dd/yy)

To: _____
Chair, Graduate Policy Committee, Department of Electrical and Computer Engineering

From: _____
Chair, Master of Science Advisory Committee

The Plan of Study Course List for _____, whose
area of interest is _____, is given in that which follows.

	Course Number	Course Title	Sem./Cr.	Transfer-Grade
1.	____ - ____ - ____	_____	_____	_____
2.	____ - ____ - ____	_____	_____	_____
3.	____ - ____ - ____	_____	_____	_____
4.	____ - ____ - ____	_____	_____	_____
5.	____ - ____ - ____	_____	_____	_____
6.	____ - ____ - ____	_____	_____	_____
7.	____ - ____ - ____	_____	_____	_____
8.	____ - ____ - ____	_____	_____	_____
9.	____ - ____ - ____	_____	_____	_____
10.	____ - ____ - ____	_____	_____	_____
11.	____ - ____ - ____	_____	_____	_____

Approved,

Master of Science Advisory Committee Members

	Name	Signature	Department
Chair	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____

Chair, Graduate Policy Committee, Department of Electrical and Computer Engineering

Date: _____
(mm/dd/yy)

cc. Advisory Committee Members
Student/Student File