
PROGRAM *of* STUDY

M105/Q064

CONCENTRATION: Standard

OU ID: _____

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
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* For OU graduate courses including Norman, Tulsa, Advanced Programs and Liberal Studies, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to a dual master's degree, enter **Shared** in this column.

Statistics: G4000/5000-level statistics course (BIOL G4913 or equivalent).

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Electives: 21-25 hours as determined by the student's advisory committee.

[illegible]

THESIS RESEARCH: 2-6 hours BIOL 5980 required. A completed [Master's Thesis Topic and Committee Membership form](#) must be attached.

[illegible]

30 hours required

I intend to graduate in the _____ semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the *Graduate College Bulletin*.

Date _____



I have reviewed the above-named student's proposed program of study and I recommend approval.

Date _____

FOR GRADUATE COLLEGE USE ONLY:

Program effective **Fall 2012. Semester Admitted/Re-admitted:**

Date Checked: / / | Timeline Begins: | Hours Required: | **OK** **Problem**