

## PROGRAM of STUDY

Please type all required information. Do not handwrite. List courses in the order they were/will be completed. Each course, directed reading, independent study, etc. should be listed on a separate line. Include only those courses that will be applied to the degree.

### MASTER of CONSTRUCTION BUSINESS

M246

**MAJOR:** Construction Management (Online)

**NAME:** \_\_\_\_\_

**OU ID:** \_\_\_\_\_

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
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\* For OU graduate courses including Norman, Tulsa, and Extended Campus, 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.

#### REQUIRED COURSEWORK: 12 hours.

CNS 5611	Introduction to Construction Management	1			
CNS 5642	Advanced Construction Law	2			
CNS 5632	Leadership Principles in the Construction Industry	2			
CNS 5622	Lean Construction: Principles and Methodologies	2			
CNS 5652	Experiential Learning in Design and Construction	2			
CNS 5612	Construction Business Development	2			
CNS 5621	Construction Management Capstone	1			

#### ELECTIVES: 20 hours of graduate-level courses from the College of Business, selected from an approved list maintained by the College of Architecture.


**TOTAL HOURS:**

32 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](#).

Student Signature \_\_\_\_\_

Date \_\_\_\_\_



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

Printed Name of Graduate Liaison \_\_\_\_\_

Graduate Liaison Signature \_\_\_\_\_

Date \_\_\_\_\_

#### FOR GRADUATE COLLEGE USE ONLY:

Program effective **Fall 2021**. Semester Admitted/Re-admitted: \_\_\_\_\_

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