

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 SCIENCE

M501

MAJOR: Exercise Physiology

NAME: _____

OU ID: _____

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
* 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.					

CORE

HES 5823	Exercise Physiology	3			
HES 5853	Health Fitness: Theory and Application	3			
HES 5833	Advanced Exercise Physiology Laboratory	3			

RESEARCH TECHNOLOGY: 6 hours. HES 5963 Statistical Applications in Health and Exercise Science or approved substitute is required.

HES 5953	Research Methods in Health and Exercise Science	3			

ELECTIVES: 9 hours

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

HES 5980	Research for Master's Thesis				

TOTAL HOURS:

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*.

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 **Summer 2008**. Semester Admitted/Re-admitted: _____

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