AE MS Program of Study

STUDENT NAME: _____ **GTID#:** _____ **GRADUATION TERM:** _____

Last Name *First Name*

AE CLASSES AT GT			MATHEMATICS AT GT			TRANSFER CREDIT				RCR Training	
Course	Hrs	Grd	Course	Hrs	Grd	Equivalent	Hrs	Math	Other	PHIL 6000*	Semester Taken
										Advisor Comments	
Total/Average											
OTHER GT SCHOOLS											
			Total/Average								
			GRAND TOTAL								
			Hours: GPA:			**Total Hours**					
			Instructions: Do not include AE 7000 or AE 9000 in the course listings. Identify every Special Topic course under Advisor Comments by number, term and title. *RCR Training does not count towards degree requirements.								
Total/Average											

	Non-Thesis Option		Thesis Option	
	Max or Min	**ACTUAL**	Max or Min	**ACTUAL**
AE class hours (MIN)	12		9	
Research hours (MAX)	3 (AE 8900)		9 (AE 7000)	
Math (MIN)	6		6	
Non-AE* (MAX)	12		9	
Non-technical** (MAX)	6		3	
Hours at 6000 or above (MIN)	24		24	
TOTAL hours	33		33	

SIGNATURES

Student's Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____

School Chair's Signature: _____ Date: _____

signature *print*