THE UNIVERSITY OF ALABAMA IN HUNTSVILLE School of Graduate Studies **PROGRAM OF STUDY FOR MASTER'S DEGREE**

Name:	A# Phone:							
Address:								
Department/Program			Degree:					
		Thesis		Non-The	esis		-	
UAH			Credit			Name of Institution if transfer	Transfer	
	Title of course		Hours	Grade	Term	course request*; remarks;	Course #	
Required (Courses			-	-			
					_			
					_			
Thesis Co	urses (if applicable)		1	1		•	1	
								
ESL Cours	ses (if applicable)		1	1	-	-		
						4		

*Copy of transcript must accompany transfer request

Approval Signatures:

For Thesis Option Only: Supervisory Committee Signatures

Student	Date	Comm. Chair	(type name here)	Date
Advisor (type name here)	Date	Member:	(type name here)	Date
Department Chair	Date	Member:	(type name here)	Date
Dean, Graduate Studies	Date	Member:	(type name here)	Date

Indicate course waivers, subsitutions or other comments pertinent to a graduation audit: