Mechanical and Industrial Engineering Department
Program of Study
Master of Science in Industrial Engineering

Name: _____ Date Entered: _____

Undergraduate Institution: _____Degree: _____ Year Graduated: ___ GPA: __

Graduate Work Transferred (Hrs., Courses, Title, Institution):_____

Area of Interest: _____

Prerequisite Course Req'd. (Not For Graduate Credit): _____

COURSE NUMBER	TITLE	CREDIT HOURS	YEAR	GRADE	COURSE SUBSTITUTE	COMMITTEE INITIALS

Committee Approval of Program

_____Major Professor

_____

_____

Graduate Program Coordinator_____

Dept. Chair_____ Date: _____