Plan of study-Masters- Mechanical Engineering (Thesis Option)

Date: _____ Entry Semester _____

Name (Last, First Middle Initial): _____ LSUID #: _____

Area of interest: _____ Anticipated Graduation Date: _____

Graduate work transferred (Hours, Courses, Title and Institution): _____

_____

Final GPA _____ (from previous University attended)

COURSE #	TITLE	CREDIT HOURS	DEPARTMENT	SEMESTER	YEAR	GRADE
	Thesis Research Graduate Seminar	ME ME	8000 7901	6 1		
	Math					

Student's Signature: _____ Date: _____

Advisory Committee Members (print names) **Signatures of Advisory Committee Members** **Date**

1. Major Professor (Chair) _____

2. Minor Professor (if applicable) _____

3. _____

4. _____

5. _____

_____

Graduate Advisor Date