**STUDENT INFORMATION**

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| **Student’s Name:** | **NAU ID:** |
| **E-mail Address:**      @nau.edu | **Phone Number:** |
| **Enrollment Term:**        (ex. Summer 2016) | **Expected Graduation:**       (ex. Spring 2019) |
| **Advisor:** | |
| **Total Required Credits for this Degree Program: 30** | |
| **This is the:**  **Initial** (upon admission)  **Final** (submitted with Graduation Application) **Program of Study** | |

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| **\*** | | **Course No.** | **Course Title** | | **Replacement Course** | | **Semester** | | **Year** | | **Units** | | **Grade** | | **T/E/P/I\*\*** | |
| 1. **Applied Mathematics (3 units required), in a topic relevant to your specific interests, such as Fourier transforms or statistical analysis** | | | | | | | | | | | | | | | | |
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| 1. **Engineering or Computer Science Management course offered through such colleges as Engineering or Business (3 units required)** | | | | | | | | | | | | | | | | |
| \* | |  |  | |  | |  | |  | |  | |  | |  | |
| 1. **Computer Science Electives (18 units required), selected with your advisory committee’s approval to match your interest**  * **This can include up to 3 units in a cross-disciplinary or otherwise related course.** | | | | | | | | | | | | | | | | |
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| 1. **Practice-oriented Projected (6 units required), facilitated and developed under your advisory committee’s guidance and focused on a real-world problem or theoretical issue with immediate relevance to current computer science practice** | | | | | | | | | | | | | | | | |
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Student’s Name:       NAU ID:

**ADDITIONAL INFORMATION**

In addition to all University and Graduate College policies, procedures, and requirements, graduate students must also adhere to the academic requirements, policies, procedures, and criteria outlined by their program’s Graduate Student Handbook.

**Students:**

You must secure official approval by your advisor and Department Chair/Director before submitting the final Program of Study.

By signing or entering your name below, you agree to the following statement:

*“Students are responsible for complete knowledge of Academic Catalog requirements in their degree plan for their catalog year and adhering to all policies in the Academic Catalog.”*

**Advisors and Chairs/Directors:**

Please indicate approval of the curriculum on the Program of Study by placing your signature (electronic signatures are permitted) in the space provided.

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| **Student:** | **Date:** |
| **Graduate Program Coordinator:** | **Date:** |
| **Advisory Committee Chair:** | **Date:** |
| **Department Chair** (required for Final)**:** | **Date:** |

**\*\*Transfer/Equivalent/Previous Graduate Degree** – Must have Advisor approval

Transfer T = Course transferred from another university

Previous Graduate Degree P = Course taken at NAU from previous graduate degree

Equivalent E = Course taken at NAU in place of required course

Internal Transfer I = Graduate level course taken as undergraduate; Not applied to undergraduate degree

**Transfer Credit Example:**

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/E/P/I\*\*** |
|  | **ABC 123** | **Fundamentals of English** | **ASU 456** | **Fall** | **2012** | **3** | **A** | **T/ASU** |