GRADUATE PLAN OF STUDY - Masters, Specialist

Wichita State University
Graduate School
1845 Fairmount
Wichita, KS 67260-0004
(316) 978-3095

Check One:  [ ] Plan of Study  [ ] Revision to Approved Plan of Study  [ ] Certificate Completion

Name __________________________ myWSU ID Number ________________________
Address __________________________ Major Code ____________________________
City, ST Zip __________________________ Completion Code ____________________

Instructions:
- One copy should be filed in the Graduate School office following the completion of 12 hours of degree work (24 hours for Master's of Fine Arts), but NO LATER than the 20th day of classes during fall or spring or 10th day of class for the 8 week summer session.
- Your graduate coordinator must include major and completion codes.
- All courses must be listed and, 60% of the total hours must be at the 700 level or above.
- Do not list hours in excess of the program requirements. All hours will be considered part of the degree requirements.
- Include institution name and location for courses being transferred into the program.
- Identify additions or deletions to previously approved plan by placing A or D in the revision column.
- Substitutions for required courses must be indicated on the plan and must cover equivalent subject matter.

List prerequisites, (if any) that are not a part of the hours required for the degree:

__________________________________________  __________________________

List Language or tools requirements that are not a part of the hours for the degree:

__________________________________________  __________________________

Identify the type(s) of terminal activity, if any, which are required:

Comprehensive Exam ____________ written ____________ oral
Portfolio, Project or Directed Study Exam ____________ written ____________ oral
Internship or Practicum Exam ____________ written ____________ oral
Thesis or Dissertation Defense ____________ Oral
Recital or Exhibition ____________ performance
No Requirement ____________ coursework only
Other (identify) ____________

Committee (Type or Print Names)

__________________________________________  Chair
__________________________________________  Director (MFA)
__________________________________________  Member
__________________________________________  Member
__________________________________________  Member
__________________________________________  Member from Outside the Major Area