PROGRAM OF STUDY FOR THE M.S. DEGREE IN ENVIRONMENTAL SCIENCES

The University of Tennessee at Chattanooga

Name _____ Social Security Number _____

Department _____ Date _____

To the Graduate Program Director and Department Head, Biological and Environmental Sciences
I submit below, for the approval of the department, my proposed program of study in partial fulfillment of the M.S. Degree in Environmental Science.

I expect to complete degree requirements by the date _____, I understand that additional course work may be added to this proposed program of study by my Advisory Committee, if such work is needed to correct deficiencies in my academic preparation. I also understand that all substitutions must be approved by my Advisory Committee chairperson and the Graduate School,

UTC Courses

Dept. Abbr.	Course No.	Course Title	Credit Hrs

Transfer Credit

Dept. Abbr.	Course No.	Course Title	Credit Hrs	Institutuin

Total semester hours listed for credit _____

Prerequisites:

(Specified by Committee

Approval Recommended_____ _____ _____

(Committee Chairperson signature) Student signature Date

_____ _____ _____

Member 1 signature Student's mailing address Date

_____ _____ _____

Member 1 signature Graduat Program Director signature Date

_____ _____ _____

Member 1 signature (optional) Department Head signature Date