Form 2

DEPARTMENT OF MECHANICAL SCIENCE AND ENGINEERING M.S. DEGREE _ NON-THESIS OPTION

NAME: DATE:	
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UIN: _____

STATEMENT OUTLINING YOUR REASONS AND OBJECTIVE FOR SELECTING THIS OPTION:

** If planning to continue Ph.D., you must address why you are not doing a thesis MS.

STUDY PLAN:

Completed Coursework:			<u>To (</u>	<u>Complete:</u>	
Course		Credit	Cour	se	Credit

BRIEF SUMMARY OF THE RESEARCH WORK FOR WHICH YOU ARE TO RECEIVE INDEPENDENT STUDY CREDIT:

APPROVALS:

Independent Study Advisor Name:

(Please Print)

Academic Advisor Name:

(Please Print)

Independent Study Advisor Approval:

Signature

Academic Advisor Approval:

Signature

Action by the Graduate Policy Committee:

Approved

Not Approved
Not Approved