

CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
PROGRAM OF STUDY FOR THE MASTER OF SCIENCE IN ENGINEERING MANAGEMENT DEGREE

OPTION: _____

BACCALAUREATE DEGREE IN: _____

NAME: _____

BRONCOID: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

RES PHONE: _____ 2ND PHONE: _____

CPP Email: _____

GRADUATE OFFICE USE ONLY

First Program course taken

Quarter _____ Year _____

Completion required by end of

Quarter _____ Year _____

Comprehensive Exam passed

Quarter _____ Year _____

Approved thesis certified

Quarter _____ Year _____

By _____ Date _____

Program Received

Degree Granted _____



GWT

Program _____ Units _____ Gr Pts _____ GPA _____

REQUIRED COURSES

PREFIX	NO.	TITLE	QNR	UNITS	GR
--------	-----	-------	-----	-------	----

A. BREADTH REQUIREMENTS

B. EMPHASIS AREA

C. ELECTIVES

ADVANCEMENT TO CANDIDACY

DATE: _____

D. TERMINAL REQUIREMENTS

EGR	692	Independent Study - Comp.Exam		2	
EGR	696	Master's Thesis			

Total = () Unit
 Minimum = 48

STUDENT'S SIGNATURE: _____ Date: _____

ADVISOR SIGNATURE: _____ Date: _____

GRADUATE COORDINATOR: _____ Date: _____

DEPARTMENT CHAIR: _____ Date: _____

COLLEGE DEAN: _____ Date: _____

For Graduate Office Use Only

Contract reviewed and forwarded to Registrar's Office

Graduate Analyst: _____ Date: _____