School of Communication Graduate Program Plan of Study

	SSN: Telephone:									
Address:						E-mail: _				
				City/state	Zip Code					
Signatures: The stu	ident and advisor ha	ve discuss	ed and agree	e on the plan of s	tudy. The student ha	s 6 hours gr	aduate course v	work com	pleted.	
Student Signature				Date	Graduate Program Chair					Date
Thesis Option					Project Option	n				
Course #	Course Title	Gra	de Hrs.	Tent. Sem	Course #	Course Tit	le	Grade	Hrs.	Tent. Sem
COMM 8010*	Sem: Quantitative		3		COMM 8010*	Sem: Quar	ntitative		3	
COMM 8020*	Sem: Qualitative		3		COMM 8020*	Sem: Qual	itative		3	
COMM 8470*	Sem: Speech Comm	n.	3		COMM 8470*	Sem: Spee	Sem: Speech Comm.		3	
COMM 8570*	Sem: Mass Comm.		3		COMM 8570*	Sem: Mass Comm.			3	
	Elective		3			Grad Only	Seminar		3	
	Elective		3			Elective			3	
	Elective		3			Elective			3	
	Elective		3			Elective			3	
						Elective			3	
						Elective			3	
COMM 8990*	Thesis		3			Elective			3	
COMM 8990*	Thesis		3		COMM 8970*	Project			3	
Identifies required	d courses. TO	OTAL HO	URS: 30		* Identifies <u>requir</u>		TOTAL	HOURS	: 36	
se up to nine hour	approved undergradurs of elective from out hours from another	tside the d university	epartment, a , subject to a	and project optio approval.		up to 12 hour	rs from outside	the schoo	ol. All s	tudents may
Transfer Credits: M			Course # &			Grade	Quarter Hrs.		. Hrs.	Date Take