

College of Graduate Studies  
**Degree Plan for Master of Science in Professional  
 Science, Engineering Management**



**Part I – Student Information**

Name: \_\_\_\_\_ MTSU ID #    M \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ MTSU Email Address: \_\_\_\_\_

Degree Sought: \_\_\_\_\_ Major: \_\_\_\_\_

*If applicable:*

Concentration: \_\_\_\_\_ Specialization: \_\_\_\_\_ Minor: \_\_\_\_\_

Choose One:      Thesis Option                      Non-Thesis Option

I understand that if human or animal subjects are involved in my research(including thesis research), it is my responsibility to file a research protocol application with the Institutional Review Board (Sam H. Ingram Building, 011B) before I begin collecting data. Failure to secure this permission prior to conducting my data collection using human or animal subjects will negate the use of that data for any academic purpose including thesis.

\_\_\_\_\_ *Signature of Student*                                              \_\_\_\_\_ *Date*

**Part II – Signatures and Approvals**

**Signatures in this area are required for approval of *all* degree plans.**

I certify that the following program, when successfully completed, meets all coursework requirements for this degree.

\_\_\_\_\_ *Graduate Advisor Name (Print)*                                              \_\_\_\_\_ *Signature*                                              \_\_\_\_\_ *Date*

\_\_\_\_\_ *College of Graduate Studies Approval*                                              \_\_\_\_\_ *Date*

*Signatures in this area are required for approval only if applicable to degree program.*

**This individual holds a professional license, or licensure requirements will be met by the courses listed below.**

\_\_\_\_\_ *Teacher Licensure Office Approval (Print)*                                              \_\_\_\_\_ *Signature*                                              \_\_\_\_\_ *Date*

**Programs that require educational component**

\_\_\_\_\_ *Chair of Educational Leadership/Elementary Education (Print)*                                              \_\_\_\_\_ *Signature*                                              \_\_\_\_\_ *Date*

**Minor Advisor**

\_\_\_\_\_ *Graduate Minor Advisor (Print)*                                              \_\_\_\_\_ *Signature*                                              \_\_\_\_\_ *Date*

**Part III – Course Information**

List ONLY graduate-level courses to be counted toward the degree. Include those completed as well as those still to be taken to fulfill degree requirements.

Candidate must complete 36 hours in the following course of study:

				Transfer Credit	
Course ID	Course Title	Cr Hrs	Grade	Course ID	Institution
<b>Core Courses (15 Hours)</b>					
ACTG 6100	Accounting and Legal Issues for Managers	3			
BCEN 6820	Managerial Communication	3			
BCEN 6910	Internship Program	3			
MGMT 6740	Leadership and Motivation	3			
STAT 5140	Probabilistic and Statistical Reasoning	3			
<b>Concentration Courses (21 Hours)</b>					
ET 6010	Safety Planning	3			
ET 6190	Six Sigma	3			
ET 6300	PMI Project Management	3			
ET 6390	Productivity Strategies/Lean Systems	3			
ET 6620	Methods of Research	3			
ET 6870	Engineering Management Systems	3			
ET 6520	Advanced Topics in Technology	3			
ET 6810	Engineering Management Theory and Application				

**Department must verify that all admission conditions(s) were or were not met:**

Department Admissions Conditions Met? Yes \_\_\_\_\_ No \_\_\_\_\_