

DEPARTMENT OF CIVIL AND ENVIRONMENTAL ENGINEERING
FLORIDA INTERNATIONAL UNIVERSITY

DEGREE PROGRAM: CIVIL ENGINEERING ENVIRONMENTAL ENGINEERING

SPECIALIZATION AREA

Structures/Construction/Geotechnical Water Resources Transportation Environmental

M.S. PROGRAM OF STUDY

Student Name _____ PID _____ Email _____ Phone _____
Entrance Date _____ Expected Graduation Date _____
BS Degree _____ BS Institution _____ BS Degree Date _____

Option: Thesis Engineering Project All-Course

ACADEMIC ADVISOR ALL-COURSE OPTION OR THESIS/PROJECT COMMITTEE: (Name, Signature, Date)

Academic Advisor/Major Professor _____
Faculty Member _____
Faculty Member _____

MINIMUM PLANNED COURSES (minimum 30 credit hours including a project or thesis)

	Course No.	Course Title	Credits	Term	Grade	Alternative
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____	_____
13	_____	_____	_____	_____	_____	_____

Notes: 1. Please select additional courses as alternative courses in case the desired courses are not offered during the program. Please place a check mark in the last column to indicate an alternative course.

2. Please consult the graduate catalog for a list of required courses in the student chosen specialty area.

I have read, understood, and agree with the above and the reverse side of this form. I have read the Civil and Environmental Engineering Department graduate catalog and the University Graduate School Policies and Procedures regarding graduate studies. By signing this form, I will take the responsibility of following all the university and departmental policies, procedures, and regulations.

Student Signature _____ Date _____

OFFICIAL USE ONLY					
GPA		Admission Conditions		Graduate Program Director	
TOEFL				Signature/Date	
GRE				Chair	
Deficiencies		Yes	No	Signature/Date	
Transfer Credits		Yes	No	(If there are deficiencies or transfer credits, complete page 2.)	

COURSES TO BE TRANSFERRED

	Course No.	Course Title	Credits	Term	Grade	Institution
1						
2						
3						
4						
5						
6						
7						

- Notes: 1. A maximum of 6 credits of relevant courses will be allowed to be transferred from another institution.
 2. A maximum of 6 credits of relevant courses will be allowed to be transferred from another department of FIU.
 3. A maximum of 12 credits of relevant courses will be allowed to be transferred from within the department.
 4. Any exceptions to the above will require approvals from the Graduate Advisory Committee (GPAC), if needed, the GPD and the Chair. A University Graduate School Petition for Exception form must also be filled out. Attach additional pages as needed.

ENTRANCE DEFICIENCIES

	Course No.	Course Title	Credits	Term	Grade
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					

- Notes: If any courses are identified as deficiencies and they are prerequisites of a graduate course, this graduate course cannot be taken until the deficiency courses have been taken with a minimum grade of C.

OFFICIAL USER ONLY			
Graduate Program Director Signature/Date		Chair Signature and Date	
GPAC Member Signature/Date		GPAC Member Signature/Date	
GPAC Member Signature/Date		GPAC Member Signature/Date	