

University of Arkansas
 Department of Electrical Engineering
 Schedule of Study
 M.S. Programs
 (use more than one sheet if necessary)

Name: -----

Degree Program: _____

Course Title	Course#	Credits	Grade	Instructor
Semester				
Semester				
Semester				
Semester				
Semester				
Semester				

Check One Thesis Option Non-Thesis Option

 Major Professor Member Member Member