MASTER OF SCIENCE IN SYSTEMS SCIENCE (MSYSC) PLAN OF STUDY

Computer Science Concentration (SYCSCM) Circle one: YEAR 1 or YEAR 2

Circle One: Project (SYSC 7090) or Thesis (SYSC 8000)

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LSU ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major Professor (Advisor): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Co-advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisory Committee Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  Course # | Semester | Title | Credit Hours  |
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 **TOTAL CREDIT HOURS ­­­­­­ \_\_\_\_\_\_\_\_\_**

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Student’s Signature Date Major Professor (Advisor) Date Graduate Advisor Date

**\* Full advisory committee information must be provided for the YEAR 2.**