

Civil and Environmental Engineering

## Master of Science (MS) Degree Requirements Certification Form

| Name             |     |               | Student ID<br>9 digit # |                      |  |  |
|------------------|-----|---------------|-------------------------|----------------------|--|--|
| FAMU             | FSU | International | Domestic                | Email                |  |  |
| B.S. Major       |     |               |                         | B.S. Graduation Date |  |  |
| B.S. Institution |     |               |                         | B.S. GPA             |  |  |

## **MS Degree Option Requirements**

| Area                             | Course No. | Course Title                        | Credits | Grade | Semester |  |  |  |  |  |
|----------------------------------|------------|-------------------------------------|---------|-------|----------|--|--|--|--|--|
|                                  |            |                                     |         |       |          |  |  |  |  |  |
| Articulation,                    |            |                                     |         |       |          |  |  |  |  |  |
| Transfer, or Other               |            |                                     |         |       |          |  |  |  |  |  |
| Additional Courses (if required) |            |                                     |         |       |          |  |  |  |  |  |
| (                                |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
| Depth/Specialty Area             |            |                                     |         |       |          |  |  |  |  |  |
| (12-15 credit hours)             |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
| Supplementary Electives          |            |                                     |         |       |          |  |  |  |  |  |
| (6-9 credit hours)               |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
| Advanced Math (3 hrs)            |            |                                     |         |       |          |  |  |  |  |  |
| RCR Training (if required)       |            |                                     |         |       |          |  |  |  |  |  |
| Graduate Seminar                 | CGN 5935   | Graduate Seminar                    |         |       |          |  |  |  |  |  |
| Thesis (6 credit hours)          | CGN 5971   | Thesis                              |         | 1     |          |  |  |  |  |  |
| <b>Total Credit Hours</b>        |            |                                     |         |       |          |  |  |  |  |  |
| Thesis Title                     |            |                                     |         |       |          |  |  |  |  |  |
|                                  |            | All MS Degree Requirements met: Yes |         |       |          |  |  |  |  |  |
| Defense Date                     |            |                                     |         |       |          |  |  |  |  |  |
| Thesis Advisor                   |            | Signature                           |         | 1     | Date     |  |  |  |  |  |
|                                  |            | U                                   |         |       |          |  |  |  |  |  |
|                                  |            |                                     |         |       |          |  |  |  |  |  |
| Graduate Coordinato              | r          | *Signature                          |         |       | Date     |  |  |  |  |  |
|                                  |            | *Signatura                          |         |       |          |  |  |  |  |  |
| Department Chair                 |            | *Signature                          |         |       | Date     |  |  |  |  |  |

\*Your Dept Grad Rep will acquire Dept Chair and Grad Coordinator SignaturesThe Degree Certification Form should be submitted within the first 2 weeks of the final semester