

# MSE ONE YEAR PLAN

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Are you finished with your lower division required classes (e.g., Math, Phys, Chem)?  
\_\_\_\_\_ Yes    \_\_\_\_\_ No (list classes that you need to take below)

Have you completed the liberal education requirements?  
\_\_\_\_\_ Yes    \_\_\_\_\_ No (list requirements that you need to complete)

List courses and credits that you plan to take:

Fall	Spring

List Technical Electives taken or planned (13 cr required):

Do you plan to graduate next May?

Questions?

Advisor \_\_\_\_\_

PLEASE GIVE A COPY OF THIS FORM TO PROF. LORRAINE FRANCIS