

UNIVERSITY OF CALIFORNIA, IRVINE

SCHOOL OF ENGINEERING

Plan of Study
Masters of Science
in Civil Engineering (Water Resources)

Name (last, first)			
Local Address			
Thesis Option	Non-Thesis Option	Phone No.	
Thesis Title			

Quarter expected to Graduate : _____ Quarter: _____ Year

Course	Units	Grade	Quarter Completed	Institute Attended	
					<u>Examination Committee</u>
					Chair
					Member 2
					Member 3
					Faculty Advisor <i>(Signature)</i>
					Graduate Advisor <i>(Signature)</i>

Signature of Candidate: _____	Date: _____
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This form must be submitted at least **TWO** quarters prior to completion of degree requirements.
Any changes to this form **MUST** be approved by the Faculty and Graduate Advisors.

Graduate Affairs Office
114 Rockwell Engineering Center