The University of Texas at San Antonio
Program of Study for the Master's Degree

Name: 

Program of Study for the Degree: Master of Science

Catalog: Major: Physics Concentration: N/A

The following courses are required for the degree indicated above:

<table>
<thead>
<tr>
<th>Discipline &amp; Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>Grade</th>
<th>When &amp; Where Completed If Not UTSA</th>
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Total

Upon completion of the above requirements, in addition to meeting the University-wide requirements for all Master's degrees, the above-named student will have satisfied all requirements for the Master's Degree.

GRADUATE ADVISOR'S SIGNATURE _______________________________ Date __________

DEPARTMENT CHAIR'S SIGNATURE ______________________________ Date __________

DEAN'S SIGNATURE ___________________________________________ Date __________

THE ORIGINAL COPY OF THIS FORM MUST BE FILED WITH THE REGISTRAR

DO NOT WRITE BELOW THIS LINE

Applied for degree ________ Time Limit (6yrs) ________ Hours of A ________ x 4 = ________
Advanced to candidacy ________ Catalog ________ B ________ x 3 = ________
Admission Cleared ________ Indep. Study Max.(6) ________ C ________ x 2 = ________
Total Transfer Hrs. (6) ________ Spec. Prob. Max. (6) ________
UT System Transfer ________ Comprehensive Exam ________ Total ________
Non-UT transfer ________ Thesis Filed ________ GPA (3.0) ________
Notes: ___________________________________________________________________
Graduated

Program of Study Non-Thesis Option

M.S. Form 5