Program of Studies
Aerospace Engineering MS

Santa Clara Engineering

Name: …… **Student SCU #** ……
First Last

Expected Graduation Date: …….. POS VERSION: NEW UPDATED FINAL

1. **Transfer Credits:**

A maximum of 9 quarter units or 6 semester units may be transferred from another accredited institution. Only courses completed with a grade of C- or higher are eligible for transfer credit. Extension, continuing education, and online courses are not accepted. BS/MS students may transfer up to 20 graduate-level units completed while pursuing their BS degree.

Institution	Course	SCU Equivalent	Units	Grade	Year

2. **Graduate Core Requirements:** Must take at least 1 course from the 2 graduate core areas (minimum 4 units). NO WAIVERS OR SUBSTITUTIONS WILL BE ACCEPTED.

Graduate Core Area	Course #	Course Title	Units	Grade
Engineering and Society				
Professional Development				

3. **Applied Mathematics Requirements: 8 units from Amth/Mech 200 and 201 or 202 and an approved two course sequence**

Dept.	Course #	Course Title	Units	Grade
AMTH/MECH				
AMTH/MECH				
AMTH				

4. **Aerospace Core Requirements: minimum 8 units from approved list**

Course #	Course Title	Units	Grade

5. **Aerospace Engineering Courses: minimum 12 units from approved list**

Course #	Course Title	Units	Grade

Cont: Aerospace Engineering Courses: minimum 12 units from approved list

Course #	Course Title	Units	Grade

6. **Elective Courses: minimum 14 elective units**

Course #	Course Title	Units	Grade

GRADUATION REQUIREMENTS

TOTALS	
Transfer Units- 9 quarter units maximum) (BS/MS 20 units maximum)	
Total SCU Units	
Total Units (46 quarter units minimum)	
Current Cumulative GPA	

I understand that it is my responsibility to:

- **Ensure the transcripts for transfer credits are sent to the Graduate Services Office.**
- **Obtain my advisor's approval and signature of this program and of any subsequent changes needed.**
- **Complete the program as approved with a minimum of 46 units and a 3.0 cumulative GPA with no grade below C-.**

Student Signature/Date: _____ /_____

Advisor Name (print): Dr. Mohammad Ayoubi

Advisor Signature/Date _____ /_____

Thesis Required [ ]
Thesis Title: _____ Date Submitted: _____