○ Initial
○ Amended

Wright State University
College of Graduate Programs and Honors Studies

Master of Science in Biomedical Engineering
Program of Study

College of Engineering and Computer Science
Department of Biomedical, Industrial & Human Factors Engineering

Name: Last, First		UID	
Focus Area: ☐ Biomaterials ☐ Orthopedic and Medical Devices	Option: ☐ Thesis ☐ Course	2nd Master's? ☐ Yes ☐ No	4+1 program? ☐ Yes ☐ No
Email (@wright.edu)	Projected Completion Semester/Year		

Please list your MSBME program courses below in chronological order of when they were or will be taken.

Course Prefix	Course #	Cr Hr	Course Title	Grade	Semester/ Year

Student signature	Date

APPROVALS

Major Advisor Signature	Major Advisor (print)
Administrative review: _____	**Date: _____**
Department Chair or Program Director Signature	Date

Administrative notes regarding student status (4+1 courses, second master's degree, petitions, etc)