

## PROGRAM of STUDY

Please type all required information. Do not handwrite. List courses in the order they were/will be completed. Each course, directed reading, independent study, etc. should be listed on a separate line. Include only those courses that will be applied to the degree.

### MASTER of SCIENCE

F587/Q224

**MAJOR:** Interior Design (First Professional) Accelerated, with Bachelor of Science in Environmental Design

**NAME:** \_\_\_\_\_ **OU ID:** \_\_\_\_\_

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
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\* For OU graduate courses including Norman, Tulsa, and Extended Campus, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to the bachelor's degree, enter **Shared** in this column.

#### CORE COURSEWORK:

I D 5123	Environment and Human Behavior	3			SHARED
I D 5343	Indoor Environmental Quality	3			SHARED
I D 5523	Graduate Studio I	3			SHARED
I D 5533	Graduate Studio II	3			SHARED
I D 5534	Graduate Studio III	4			
I D 5544	Graduate Studio IV	4			
I D 5564	Graduate Studio V	4			
I D 5763	Graduate Interior Design Computer Application	3			SHARED
I D 5773	Graduate Interior Construction	3			SHARED
I D 5163	Design Computation Visualization and Analysis	3			SHARED
I D 5793	Interior Materials and Specifications	3			SHARED
ARCH 5543	Architectural Theory and Criticism	3			SHARED
ARCH 5463	Advanced Sustainable and Resilient Systems	3			
I D 5573	Interior Lighting	3			
I D 5413	Indoor Controls and Technology	3			
I D 5463	Interior Design Office Professional Practice	3			

Choose 3 hours of any Gibbs College of Architecture Research Methods course approved by the graduate liaison:

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**RESEARCH ELECTIVE:** Choose 3 hours of graduate-level research coursework from the approved list of courses maintained by the department.

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**PROJECT:** 6 hours of I D 5950 Masters of Science in Interior Design Project.


**TOTAL HOURS:**   63 hours required

I intend to graduate in the \_\_\_\_\_ semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the [Graduate College Bulletin](#).

\_\_\_\_\_  
Student Signature Date



I have reviewed the above-named student's proposed program of study and I recommend approval.

\_\_\_\_\_  
Printed Name of Graduate Liaison Graduate Liaison Signature Date

**FOR GRADUATE COLLEGE USE ONLY:** Program effective **Fall 2025. Semester Admitted/Re-admitted:** \_\_\_\_\_

Date Checked: \_\_\_\_/\_\_\_\_/\_\_\_\_ | Timeline Begins: \_\_\_\_\_ | Hours Required: \_\_\_\_\_ | **OK** \_\_\_\_ **Problem** \_\_\_\_