

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 URBAN DESIGN

F865/Q224

MAJOR: Urban	Design Accelera	ted with B	achelor of 9	Science in F	Invironmental	Design
	Design Accelere	iccu, with D				DCJISH

NAME:			OU	ID:	
COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
* For OLI graduate courses including Norman, Tulsa, and Extended Campus, leave this column blank. For transfer credit (including OLI Health Sciences Center courses)					

enter the institution name in this column. For courses applied to an accelerated degree, enter Shared in this column.

18 hours of shared coursework may count toward the graduate electives.					
CORE COURSES: 9 hours. 6 hours ARCH 6680 Urban Design Studio, 3 hours ARCH 6590 Professional Project Research.					

PROFESSIONAL ELECTIVES: 9 hours.

ELECTIVES: Choose at least nine hours of other electives as approved by director of the program.

PROJECT: 6 hours of ARCH 6690 Professional Project.

TOTAL HOURS:	33 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 2024. Semester Admitted/Re-admitted:		
Date Checked:// Timeline Begins:	Hours Required: OK	_ Problem