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* **ARTS**   M494

MAJOR: Global Affairs (Electronic Delivery)   **CONCENTRATION:** _____

NAME: _____   **OU ID:** _____

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*

* For OU graduate courses including Norman, Tulsa, Advanced Programs and Liberal Studies, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to a dual master's degree, enter **Shared** in this column.

CORE COURSES

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
IAS 5902	Global Political Turbulence	2			
IAS 5912	Global Economic Turbulence	2			
IAS 5922	Global Social Turbulence	2			

FIELD OF CONCENTRATION: 9 hours, consisting of three 3-hour courses to be chosen from International Security Studies, Global Economics and Development, or Middle Eastern Studies. Courses to be selected from a list maintained by the program.

DISTRIBUTION REQUIREMENT: 3 hours. One course from another non-concentration track.

AREA STUDIES: 9 hours. International Security Studies and Global Economics & Development concentration studies may take courses from a list maintained by the department. Middle Eastern Studies students will choose three hours in Middle Eastern Studies and six hours in another global region as approved by the department.

PRACTICUM

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
IAS 5803	Global Affairs Practicum	3			

EDUCATION ABROAD: 3 hours. Faculty-led overseas experience. Location and substantive focus vary.

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

GRADUATE PROGRAMS for ACADEMIC EXCELLENCE
EST. 1909
THE UNIVERSITY OF OKLAHOMA
GRADUATE COLLEGE

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 **Summer 2022. Semester Admitted/Re-admitted: _____**

Date Checked: _____/_____/_____ | Timeline Begins: _____ | Hours Required: _____ | **OK** ____ **Problem** ____