

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

M775

MAJOR: Philosophy

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 a dual master's degree, enter **Shared** in this column.

- Up to 8 hours may be taken outside the department with approval from the Director of Graduate Studies.
- A maximum of 3 hours of PHIL 5990 will be allowed in this program.

REQUIRED COURSEWORK: 6 hours for thesis students. 9 hours for non-thesis students. PHIL 4133 must be taken for graduate credit.

PHIL 4133	Symbolic Logic I	3			
PHIL 5813	Philosophy Proseminar	3			

Non-thesis students only:

PHIL 5823	Philosophy Graduate Writing Seminar	3			
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DISTRIBUTION COURSEWORK:

History of Philosophy courses: 6 hours. Chosen from the list of approved courses maintained by the academic unit.

Metaphysics and Epistemology courses: 6 hours. Chosen from the list of approved courses maintained by the academic unit.

Value courses: 6 hours. Chosen from the list of approved courses maintained by the academic unit.

ELECTIVES: Choose 6 hours of PHIL or other graduate-level coursework approved by academic unit.

THESIS RESEARCH: 3 hours of PHIL 5980 required for thesis students. A completed [Master's Thesis Topic and Committee Membership form](#) must be attached.

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](#).

No Yes

I am also enrolled as a doctoral student, and I wish to receive the non-thesis master's degree on the basis of my doctoral general examination, which I will take in the _____ semester.



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 **Summer 2024. Semester Admitted/Re-admitted:** _____

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