

# MS-TCP Degree Planning Form

Name:

Student ID#:

CU Email:

Required Course Areas	Credits
1x Fundamental Course	3
2x Seminar Courses	2
4x Core Courses (1 from each emphasis area)	12
3x Advanced Electives	9
2x Master's Project or Thesis	6
<b>Total Required Credit Hours</b>	<b>32</b>

**Course Satisfying Fundamental Requirement**

Semester/Yr.	Course #	Course Title	Credit

**Courses Satisfying Seminar Requirements:**

Semester/Yr.	Course #	Course Title	Credit

**Courses Satisfying Core Elective Requirements:**

Semester/Yr.	Course #	Course Title	Credit

**Courses Satisfying Advanced Elective Requirements:**

Semester/Yr.	Course #	Course Title	Credit

**Courses Satisfying MS Project or Thesis Requirement:**

Semester/Yr.	Course #	Course Title	Credit

Notes:

Faculty/Academic Advisor Signature:

Date: