THE
UNIVERSITY
OF RHODE ISLAND
GRADUATE SCHOOL

THINK BIG   WE DO℠

Non-Thesis Master's Degree Program of Study

Program of Study   ○ Original   ○ Revised

Student Name		Today's Date	
URI ID		Department	
Preferred E-mail		Program	
Student Phone #		Specialization (if applicable)	

A. Courses Taken in Degree Program at URI

Please be sure that any courses listed in the URI catalog as requirements for your degree appear in this section. Courses not listed in any other section of this form (B-E) should be listed here. For "Special Problems" or "Directed Study" or any other open-ended course, the sub-title should be listed. Please see Section 7.40 of the Graduate School Manual.

Course Code	Title	Credits	Grade		Grad School Only
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B. Graduate Courses Taken as a Non-matriculating Student

Please see Section 3.30 of the Graduate School Manual.

Course Code	Title	Credits	Grade		Grad School Only
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C. Courses Transferred from Other Institutions

Please see Section 7.20 of the Graduate School Manual. After the course(s) has been completed, and official transcript should be requested and sent directly to the Graduate School.

Course Code	Title	Institution	Grade	Credit (qtr/sem)	Date Completed	Equivalent Credit	Grad School Only	
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D. Graduate Courses Taken as an Undergraduate, but Not Applied to an Undergraduate Degree

Please see Section 3.33 of the Graduate School Manual. Please note that for these courses a letter from the student's undergraduate dean's office verifying that these courses were not used for their undergraduate degree is required.

Course Code	Title	Credits	Grade	Grad School Only	
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				☐	
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Enter credits in the following sections;

Section A [ ] Section B [ ] Section C [ ] Section D [ ]   Total Program Credits(A+B+C+D) [ ]

Courses Required to be Taken but not as Program Credit

Courses taken to satisfy entrance deficiencies, course prerequisites and tool or language requirements, as well as courses not essential to the Degree Program

Course Code	Title	Credits	Grade	Grad School Only	
				☐	
				☐	
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				☐	

Student: Once you have completed and electronically signed the form, the file should be named in the format URID_Lastname_Firstname_POS.pdf (ex: 1002xxx34_Smith_John_POS.pdf) and sent to your Major Professor for review. This form may also be printed for your records.

1.Student [   ]   Department [   ]

Major Professor: Once you have completed and electronically signed the form, the file should be named in the format URID_Lastname_Firstname_POS.pdf (ex: 1002xxx34_Smith_John_POS.pdf) and sent to your Major Professor for review. This form may also be printed for your records.

2. Advisor [   ]   Department [   ]

3. Department Chair/ Graduate Director

Department

Graduate School Use Only

Notes

○ Approved   ○ Not Approved

Graduate School