

**OSU GRADUATE COLLEGE**  
**PLAN OF STUDY FOR THE MASTERS DEGREE**

Please check:  Original Plan  
 Final Revised Plan  
(See back for instructions)

Last Name (Surname) \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Student ID Number \_\_\_\_\_

Degree (Check one):  Master of Arts  Master of Science  Master of \_\_\_\_\_

Major subject for the degree Human Environmental Sciences Major Department Human Environmental Sciences

Option or Specialization Family Financial Planning Minor (if applicable) \_\_\_\_\_

List previous colleges attended with \_\_\_\_\_  
Degrees earned and dates conferred: \_\_\_\_\_

List Committee Members (**Print or Type**): 1 \_\_\_\_\_ 2 \_\_\_\_\_  
Chair Member  
3 \_\_\_\_\_ 4 \_\_\_\_\_  
Member Member

Will your research involve the use of human subjects? (Check one)  YES  NO

Option (Check one):  Thesis  Creative Component  Report

\*(If creative component requirement is satisfied by a course, list the course below and designate it with an asterisk)

**List all graduate courses required for the degree**  
**(Courses used for previously earned degrees cannot be included)**

Course Prefix and Number	Course Title	Institution Name <sup>#</sup>	Semester/Year <sup>#</sup>	Credit Hours
DHM 5503	Housing/Real Estate for Family Financial Planning	OSU		3
HDFS 5203	Family Systems	OSU		3
HES 5253	Family Economics	OSU		3
HES 5303	Fundamentals of Family Financial Planning	OSU		3
HES 5353	Financial Counseling for Family Financial Planning	OSU		3
HES 5403	Estate Planning for Families	OSU		3
HES 5453	Retirement Planning, Employee Benefits & the Family	OSU		3
HES 5553	Insurance Planning for Families	OSU		3
HES 5603	Investing for the Family's Future	OSU		3
HES 5653	Personal Income Tax for Family Financial Planning	OSU		3
HES 5703	Professional Practices in Family Financial Planning	OSU		3
HES 5803	Family Financial Planning – Case Studies	OSU		3
REMS 5953	Elementary Statistical Method	OSU		3
HES 5240	Master's Creative Component (Practicum)	OSU		3

# - Do not abbreviate college name other than OSU. Abbreviate semester and year, e.g., Fall 2002 – FA '02, Summer – SU '02, Spring – SP '02.

Anticipated Date of Graduation \_\_\_\_\_

I understand that the approval of this plan of study is conditional and is based on the assumption that I will complete my degree within a 7 year time period. In addition, I understand that no course on the plan of study can be older than 10 years at the time of graduation. Courses taken for pass/no pass credit cannot be included in the plan of study. If these conditions are not met, I understand that a new plan of study must be submitted for approval. I am also aware that IRB approval, with my name listed as an investigator, must be obtained prior to conducting thesis research with human subjects. Failure to do so means that my thesis cannot be accepted.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

### APPROVAL SIGNATURES:

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department/School Head/Director/College Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean of the Graduate College

**Do not write in this box (office use only)**

Date Plan was received  
at the Graduate College:

Date Revised Plan Was  
Received at the Graduate College:

Date Plan Was Approved  
at the Graduate College:

Semester of First Enrollment: \_\_\_\_\_ Plan of Study Valid Through: \_\_\_\_\_

### INSTRUCTIONS FOR COMPLETING THE PLAN OF STUDY FORM

1. Complete the form on the front side of this page. Please type the information. Additional forms can be requested from the Graduate College (202 Whitehurst) if the coursework does not fit on one sheet. Please staple any additional pages to the first page of the Plan of Study.
2. List the course prefix and course number in the first column and the course title in the second column. (Note: all 3000 and 4000-level courses included on the plan must be offered for graduate credit. If a course is offered for graduate credit an asterisk (\*) will appear next to the course number in the OSU catalog.) In the third column, list the institution where the course will be taken. Give the semester and year the course will be taken in the fourth column. Finally, list how many credit hours will be received for each course in the fifth column.
3. Only **ONE** copy of the completed form must be submitted to the Graduate College, although it is suggested that the student retain a copy for his or her own use and information. Once the Graduate College has approved the plan, a copy will be sent to the Graduate Coordinator of the major department.

### INSTRUCTIONS FOR MAKING REVISIONS TO THE ORIGINAL PLAN OF STUDY

To revise the plan of study, you may obtain an approved copy of the original plan from the graduate coordinator, or graduate records office in your department or college. The committee chair must initial any changes that are made to this plan. When the changes are completed, the revised plan must be resubmitted to the Graduate College for approval. **The plan should be revised and resubmitted only once, at the beginning of the semester of graduation.**

Rev Sep 2002