Georgia Tech School of Civil and Environmental Engineering
College of Engineering

Ph.D. Program of Study

To: **Dr. Jim Mulholland**
Associate Chair for Graduate Programs
School of Civil and Environmental Engineering

From:
Advisor

Re:
Student's Name **GTID**

The Guidance Committee met on **and approved the following Program of Study.**

MAJOR COURSES

(Click in each box to enter text)

Prefix & Number	Course Title	Hrs	Term	Grade
	TOTAL			

MINOR COURSES (minimum of 9 hrs. – preferably outside CEE)

(Click in each box to enter text)

Prefix & Number	Course Title	Hrs	Term	Grade
	TOTAL			

OTHER COURSES

(Click in each box to enter text)

Prefix & Number	Course Title	Hrs	Term	Grade
	TOTAL			

Approved _____ **Date** _____

Advisor

The following Ph.D. Guidance Committee members are proposed for the above named student for your approval. A minimum of four (4) committee members are required.

Committee Chair **School**

Committee Member **School**

Committee Member **School**

Committee Member **School**

Committee Member **School**

Approved _____ **Date** _____

Dr. Jim Mulholland
Associate Chair for Graduate Programs