

MILR Degree Plan

Student Name: _____ **Student ID#:** _____ **Net ID:** _____

The purpose of this document is to provide the Director of Graduate Studies verification that you have met all the requirements for the Masters in Industrial and Labor Relations degree. Use this form as a guide when planning your courses. It must be completed, signed, and turned in to the ILR Graduate Office after you have registered for your final semester of courses. Students in the MILR program must:

1. Take a minimum of 48 Credits (at least 16 courses); complete a minimum of 2 full-time semesters and a maximum of 4 full-time semesters in the MILR program
2. Complete the 6 required MILR core courses, or substitute acceptable courses if a core course waiver is approved
3. Take 6 concentration courses (with advisors approval)
4. Take as many relevant and appropriate electives as needed to fulfill the 16 course and 48 credit requirement.

All courses taken toward fulfillment of the MILR degree requirements must be **courses at the 5000 level or above, and taken for a letter grade**; S/U grade option courses and grades below "C" do not count toward MILR degree requirements. Courses that carry less than 3 credits do not count, unless combined with another less-than-3 credit class. Such instances will count as 1 course, and must be taken for credit. Students must petition the Director of Graduate Studies for any policy exceptions prior to taking the course in question.

REQUIRED CORE COURSES	Course Number	Course Title	Credits	Semester Taken	Grade
	ILRHR 5600	Human Resource Management			
	ILRLR 5000	Labor Relations			
	ILRLR 5010	Labor and Employment Law			
	ILRLE 5400	Labor Economics			
	ILRST 5110	Statistical Methods for the Social Sciences			
	ILROB 5200	Organizational Behavior			

MILR Concentration: _____

Concentration courses are any courses relevant to your concentration which your advisor approves:

CONCENTRATION COURSES	Course Number	Course Title	Credits	Semester Taken	Grade	

ELECTIVE COURSES	Course Number	Course Title	Credits	Semester Taken	Grade	

Total Courses: _____ **Total Credits:** _____ **Expected Graduation Date (mm/yyyy):** _____

Advisor (*Needed final semester*): _____
Print Name Signature Date

Student: _____
Signature Date

Program Coordinator: _____
Signature Date