Industrial & Management Systems Engineering
2019-20 Catalog
Revised 06-03-2019 Distributed for planning purposes only.

FRESHMAN
M 171Q (4)
M 172Q (4)
COMX 111US (3)
WRIT 101W (3)\(^a\)
EIND 101 (1)
EIND 142 (2)
EIND 313 (3)

SOHOMORE
M 221 (3)
M 273Q (4)
CSCI 127 (4)
PHSX 220 (4)
PHSX 222 (4)
EMAT 251 (3)
EIND 300 (3)
EIND 410 (2)
EIND 364 (3)
EIND 361 (3)

JUNIOR
EIND 313 (3)
EIND 413 (3)
EGEN 201 (3)
EGEN 325 (3)
EIND 464 (3)
EIND 442 (3)
EIND 477 (3)
EIND 410 (2)
EIND 455 or EIND 457 (3)

SENIOR
EIND 499 (3)
EIND 458
EGEN 488 (0)
IMSE Cognate (3)\(^d\)
IMSE Cognate (3)\(^d\)
IMSE Cognate (3)\(^d\)
EG 101 (1)
EIND 142 (2)
EIND 364 (3)
EIND 464 (3)
EIND 458
IMSE Cognate (3)\(^d\)
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\(^a\) – Students who are exempt from MSU writing requirements may substitute WRIT 201, WRIT 221, HONR 201, or HONR 202; or add 3 credits to their cognate.
\(^b\) – Recommend completing before Senior Year
\(^c\) – Choose from EELE 250, EGEN 202, EGEN 324
\(^d\) – See IMSE Cognate Policy for details
Advising Record
(date & initials)

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MSU Core 2.0 Checklist
In order to fulfill MSU’s Core 2.0 requirements, in addition to courses required for the degree, IMSE students must complete 3 credits each of Diversity (D), Inquiry-Humanities (IH), Inquiry-Social Sciences (IS), and Inquiry-Arts (IA).

<table>
<thead>
<tr>
<th>Core</th>
<th>Course Code</th>
<th>Cr.</th>
<th>Gr.</th>
<th>Sem.</th>
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<td>D</td>
<td>IH / RH</td>
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<td>IA / RA</td>
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IMSE Cognate Electives Tracker
9 credits required, 6 at 300 and above. Plan must be pre-approved by the advisor and IMSE Program Coordinator. See IMSE Cognate Policy for details.

Cognate Title: _____________________________

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<tr>
<th>Course Code</th>
<th>Semester</th>
<th>Cr.</th>
<th>Gr.</th>
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Program of Study
The table below should be utilized to plan / track the student’s complete program of study toward the degree. A single row should be left blank between each semester.

Program of Study
Sem. | Course Code | Cr. | Gr. |
-----|-------------|-----|-----|
|     |             |     |     |
|     |             |     |     |
|     |             |     |     |
|     |             |     |     |
|     |             |     |     |
|     |             |     |     |

Advisor: _____________________________
Date: _____________________________

Program Coordinator: _____________________________
Date: _____________________________

Notes:
__________________________________________________________________________________________
__________________________________________________________________________________________
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