

Date \_\_\_\_\_  
Catalog \_\_\_\_\_

**Program of Study  
Master of Science  
Department of Physical Education, Sport and Human Performance  
Thesis Project – Sport and Fitness Administration**

Name \_\_\_\_\_  
Last First Middle

Student ID #. \_\_\_\_\_

Address \_\_\_\_\_  
Street & No. City State Zip

Telephone \_\_\_\_\_

<b>Required Core Courses ( 24 Semester Hours)</b>		<b>S.H. Credit</b>	<b>Substitution (credit hrs.)</b>	<b>Date Planned</b>	<b>Term Taken</b>	<b>Grade</b>
SPFA 640	Stat. Anal. & Design Phys. Act.	3				
SPFA 681	Research in Physical Activity and Sport	3				
SPFA 682	Scientific Bases of Sport and Physical Activity	3				
HLTH 600	Health Promotion	3				
SPFA 615	Computer Application in Sport and Physical Activity	3				
SPFA 610	Legal Issues in Sport and Fitness Administration	3				
SPFA 694	Practicum in Sport and Fitness	3				
SPFA 695	Thesis	3				
SPFA 696	Thesis	3				
	<b>Sub total</b>	<b>27</b>				
<b>Approved Electives (9 credits)</b>						
<b>TOTAL SEMESTER HOURS</b>		<b>36</b>				
Comments:  						

Project or Thesis Title \_\_\_\_\_

Date approved: \_\_\_\_\_

Date completed: \_\_\_\_\_

Practicum Site: \_\_\_\_\_

Practicum Supervisor: \_\_\_\_\_

GRE Score \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Approval Recommended:

\_\_\_\_\_  
Advisor Date  
\_\_\_\_\_  
Chair, Department of PE, Sport & Human Perf. Date

\_\_\_\_\_  
Student Date  
\_\_\_\_\_  
Dean's Office Date

\_\_\_\_\_  
Records & Registration Date