

MBA Elective Selection Form

Student Information

First Name

Last Name

Student ID:

A total of six credit hours of electives required

Fall Semester Course Information

Course Prefix and Number:

Name of Course:

Credit Hours:

Institution:

Spring Semester Course Information

Course Prefix & Number:

Course Prefix & Number:

Name of Course:

Name of Course:

Credit Hours:

Credit Hours:

Institution:

Institution:

Approvals

Student Signature:

MBA Director:

Comments: