

**FILM & VIDEO PRODUCTION
MFA Plan of Study**

Name: _____ UID #: _____

Date of first UI Reg. _____ Date: _____

Updated: _____

Semester 1 Date:				Semester 2 Date:			
Course	Title	Credit	Grade	Course	Title	Credit	Grade
Semester 3 Date:				Semester 4 Date:			
Course	Title	Credit	Grade	Course	Title	Credit	Grade
Semester 5 Date:				Semester 6 Date:			
Course	Title	Credit	Grade	Course	Title	Credit	Grade

Approved by Chair or Co-Chair: _____

Approved by Chair or Co-Chair: _____

DEO Approval: _____