Boston University Department of Biomedical Engineering 44 Cummington Mall Boston, Massachusetts 02215 T 617-353-2805 F 617-353-6766 www.bu.edu/bme



MS with Project Program Planning Sheet

Student: Program Started (Semester):		ster):
Academic Advisor:	Project Advisor:	
REQUIREMENT	COURSE/TITLE	CREDITS
	– Biomedical Engineering Seminar	0 cr
Physiology/Biology Elective:_	(either BE 605 or BE 606)	4 cr
Math Requirement:		4 cr
Graduate-Level Biomedical E	ngineering Electives (must be taken within BME depa	rtment, BE prefix):
1)		4 cr
2)		4 cr
3)		4 cr
Graduate-Level Technical Ele	ctives (may include additional BME coursework):	
1)		4 cr
2)		4 cr
Mentored Project:	BE 952 (satisfies practicum requirement)	4 cr
	REQUIRED MINIMUM TOTA	AL: 36 CREDITS
tudent's Signature Mario Cabodi, Director of BME Masters Pro		Masters Programs

BME Department will obtain this signature