

WPI Foiese Business School
Curriculum Plan for Master of Science in
INNOVATION WITH USER EXPERIENCE
(12 courses, 36 credits)

NAME _____

DATE ADMITTED _____ Spring 2021 _____

ADVISOR _____

Proposed Course of Study: COURSE NUMBER & TITLE SEMESTER

REQUIRED COURSES (5)

MIS 571 Database Applications Design and Development Spring 2021 / Online

MIS 583 UX Applications Spring 2021 / Online

MIS 584 Business Intelligence Spring 2021 / Online

MIS 585 UX Design _____

MIS 586 UX Research Methods _____

MARKETING CORE
COURSES (2)

Select 2 courses from the list below:

MKT 500 Marketing Strategy _____

MKT 561 Consumer Behavior and Analytics _____

MKT 568 Data Mining Business Applications _____

BUSINESS CORE
COURSES (1)

Select 1 course from the list below:

OBC 505 Teaming and Organizing for Innovation _____

OBC 533 Negotiations _____

FINANCE CORE
COURSES (1)

FIN 500 Financial Information and Management _____

ELECTIVES (3)

Select 3 courses from the list below:

Business Courses

ETR 500 Entrepreneurship and Innovation _____

ETR 593 Technology Commercialization: Theory, Strategy and Practice _____

MKT 562 Marketing Research _____

MKT 565 Digital Marketing _____

OIE 501 Operations Management _____

OIE 552 Modeling and Optimizing Processes _____

OIE 556 Health System Modeling and Improvement _____

BUS 5900 Internship (no more than 3 credits) _____

Design Courses UX Research Project I (Advisor approval is required)
 UX Research Project II (Advisor approval is required)
 MIS 573 System Design and Development
 IMGD 5000 Game Design Studio
 IMGD 5300 Design of Interactive Experiences

Technical Courses CS 528 Mobile and Ubiquitous Computing
 CS 546 Human Computer Interaction
 CS 573 Data Visualization
 CS 5007 Introduction to Programming Concepts, Data Structures and Algorithms
 DS 501 Introduction to Data Science
 DS 502 Statistical Methods for Data Science
 MA 511 Applied Statistics for Engineers & Scientists

If you have been awarded transfer credit or course waivers, list the approved courses and credit hours allowed below.

COURSE NUMBER & TITLE	CREDIT HOURS	TRANSFER OR WAIVER

(Do not complete below this line)

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 (To be completed by Advisor)

I have reviewed the Curriculum Plan above and agree that it comprises an acceptable program of study for the degree of Master of Science in Innovation with User Experience.

ADVISOR'S SIGNATURE: _____

DATE: _____

Important Note to Advisors: Once approved, please return the Curriculum Plan to the Executive Director of Business Programs.