PLAN OF STUDY FOR IMGD MS DEGREE WPI ID: **Student Name:** Email: **Advisor Name:** Date: **Advisor Signature:** # CREDITS Focus Area: Technical [] Serious Games [] Management [] Focus ** All students must keep an up-to-date plan on file with the IMGD Graduate Secretary. Foreign students must also file this plan at the Office of International Students. First Semester Spring/Fall Year *Term Course Code Course Title CFETSecond Semester Spring/Fall Year *Term Course Code **Course Title** Third Semester Spring/Fall Year Course Title *Term Course Code CFET

	Fourth Sem	ester	Year			Spring/Fall						
*Term_Course Code		Course Title					С	F	Ε	Т		
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*for undergraduate courses only

TOTAL CREDITS (30)

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