WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Master of Business Administration (0506)
Option 2 - Students without related undergraduate business/economics preparation
School of Business Administration & Economics

Student Name: _____ ID# _____

Mailing Address: _____ Telephone: _____

Email Address: _____ Advisor: _____

Catalog Authority: _____ Date Admitted to Graduate School: _____

Expected Completion: _____ Date Admitted to MBA Program: _____

Common Professional Component (not included in the 36 credit hour MBA)

Course(Credits)		Sem/Year	Grade	Course(Credits)		Sem/Year	Grade
BSAD 500 Survey of Business I	(3)	_____	_____	**Courses substituting for Common Professional Component**			
BSAD 501 Survey of Business II	(3)	_____	_____	Course: _____ ( )		_____	_____
BSAD 502 Survey of Math & Statistics for MBA's				Course: _____ ( )		_____	_____
	(3)	_____	_____	Course: _____ ( )		_____	_____
ECON 500 Economic Analysis	(3)	_____	_____	Course: _____ ( )		_____	_____

Business Administration Core & Elective Requirements (36)

Course(Credits)		Sem/Year	Grade	Course(Credits)		Sem/Year	Grade
BSAD 510 Social Resp Bus Ethics	(3)	_____	_____	BSAD 560 Adv Business Statistics	(3)	_____	_____
BSAD 530 Adv Managerial Acctng	(3)	_____	_____	BSAD 570 Mgrl Finance Theory Prac	(3)	_____	_____
BSAD 540 Analysis Mkting Plan	(3)	_____	_____	BSAD 586 Adv International Business	(3)	_____	_____
BSAD 550 Mgmt & Organiztnl Thry	(3)	_____	_____	BSAD 597 Mgrl Policy & Strategy	(3)	_____	_____
BSAD 552 Human Resource Mgmt	(3)	_____	_____	ECON 512 Comp Anal Mangrl Econ	(3)	_____	_____
BSAD 556 Prod & Opertn Analysis	(3)	_____	_____	Elective: _____	(3)	_____	_____

Optional International Business Concentration (9 credits)

Course(Credits)		Sem/Year	Grade	Course(Credits)		Sem/Year	Grade
BSAD 545 Adv International Mrktg	(3)	_____	_____	BSAD 575 International Investment	(3)	_____	_____
BSAD 565 Int'l Human Resrc Mgmt	(3)	_____	_____	Course: _____ ( )		_____	_____

Total Credit Hours (minimum of 36 required): _____

Copy to Registrar on: Date: _____ **Grad. Audit sent on:** Date: _____

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Dean, School of Business: _____ Date: _____

Assoc VP Academic Affairs/
Dir of Graduate Division: _____ Date: _____

Note: All graduate credit, including transfer credit, must have been earned within the seven years prior to issuance of the graduate degree.