

**Forest Resource Management Program
2009 - 2010**

Name _____

Curriculum Planning Guide

Forest Ecology and Biology (3 courses, ≥ 10 credits)

Course Number	Title	Semester	Credits
ENVIRON 205	Silviculture	_____	4
ENVIRON 213	Forest Ecosystems	_____	3

Forest Measurement (2 courses, ≥ 5 credits)

ENVIRON 201	Forest Resources Field Skills	_____	2
ENVIRON 206	Forest Vegetation Sampling	_____	3

Forest Management (2 courses, ≥ 5 credits)

ENVIRON 320	Ecosystem Management	_____	3
ENVIRON 262	Forest Management Travel Seminar	_____	2

Forest Policy and Administration (1 policy, 1 economics; ≥ 6 credits)

_____	_____	_____	_____
_____	_____	_____	_____

Professional Ethics

ENVIRON 277	Professional Ethics for Environmental Practitioners	_____	1
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Quantitative Analysis (2 courses, ≥ 6 credits)

_____	_____	_____	_____
_____	_____	_____	_____

Electives (to meet program requirement of 48 credits)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Forestry Field Trips (not required; Western Field trip may be repeated)

ENVIRON 266	Ecology of S. Appalachian Forests	_____	_____
ENVIRON 260	Western Forestry Field Trip	_____	_____

NSEES Prerequisites:

Prerequisite	Met pre-Admission	Taken at NS*	Semester/Year
Calculus			
Statistics			
Computer savvy			
Microeconomics			
Ecology			

* *Note:* prerequisites must be completed during the first year of study. Courses taken to meet these requirements cannot be counted toward the 48 credits required for the MEM degree.

Additional Program Requirements

Professional Skills Modules

Public Speaking (date): _____ Graphical Design (date): _____

Program-sponsored Sessions

Pre-internship proposal sessions: _____

Post-internship proposal defense: _____

ENVIRON 398.01 Seminar (enroll every semester): _____

Attendance at MP symposium: 1yr _____ 2yr _____

Symposium Presentation (date): _____

Master's Project: ENVIRON 399: Semester(s) _____ Credits _____

Project title: _____

Total credits (including MP and MP symposium): _____

Certification of Completion:

Faculty Advisor Signature

Date

Faculty Advisor Name