

Master of Science Plan II Comprehensive Exam Application

Complete and return to the Graduate Program Coordinator in Electrical and Computer Engineering office as soon as you have chosen your thesis committee.

- 3 Committee Members
 - o Chair = Major Professor
 - o 2 of 3 must be ECEGP Members
- Include a copy of your approved MS Plan II Program of Study

| Student Name: | | |
|-----------------------------------|-------------------------|-----------------------------|
| Student ID: | | |
| Seminar Topic: | | |
| Proposed Date/T | ime: | |
| | Committe | ee Members |
| | | |
| Chair Print Name | | Chair's Signature |
| | | |
| Member Print Name | | Member's Signature |
| | | |
| Member Print Name | | Member's Signature |
| Vei | rification of Completic | on of Application Materials |
| | | |
| Graduate Faculty Advisor Approval | | Date |