

COMPUTER SCIENCE DEPARTMENT MASTER'S DEGREE REQUIREMENT APPROVAL

Student's Name: _____ ID Number: _____

Required CS courses:	Grade	Credits	Semester	Type (Programming, Foundations, 2 of 3: Prog Lang, Sys, Appl. [P 0/1 2 3/4 5-8])				
				P	F	PL	S	A
1. _____	_____	_____	_____	P	F	PL	S	A
2. _____	_____	_____	_____	P	F	PL	S	A
3. _____	_____	_____	_____	P	F	PL	S	A
4. _____	_____	_____	_____	P	F	PL	S	A
5. _____	_____	_____	_____	P	F	PL	S	A
6. _____	_____	_____	_____	P	F	PL	S	A

Remaining courses: _____ Notes: _____

7. _____

8. _____

9. _____

10. _____

TOTAL GPA: _____ :Credit Hours

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 Circle chosen CREATIVITY REQUIREMENT: (C,Q,R,S,TH,A)

C: (3 additional CS Courses (7, 8, 9 above): P + 5xx + 5xx or Y790)

Q: (Qualifying exams + 2 approved courses (7, 8 above))

Date Qual I passed: _____ Date Qual II passed: _____

R, S, TH: (Master's research project, Master's software project, University Master's thesis)

Title: _____

Supervisor name: _____

Supervisor signature: _____

Certifies 6 cr. Y790 with products satisfying R, S, or TH requirement.

A: Application area: _____

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 CS DEPARTMENT APPROVALS:

Date: _____