TO: ECE Graduate Program Director

Student Name: ___________________________  SID: ___________________________

Advisor: ________________________________

Local Address: __________________________ Telephone: _________________________

City: ___________________________  State: ________  Zip Code: ________________

Email Address: __________________________

TRACK: Thesis / Non-Thesis* (circle one)

* If choosing the Non-Thesis track, and if appropriate, include information about your related industrial experience as an attachment.

Note: if you are a BS-MS student, please label the courses to be double counted using #

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<th>Year:</th>
<th>Semester:</th>
<th>Courses (include project, thesis, independent study and directed study):</th>
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Approved courses for transfer credits (maximum 6 credits from other institution):
Effective February 2024

MS PROGRAM OF STUDY (cont.)

Please check (X) the following items to confirm that you are aware of those MS degree requirements

[ ] Minimum of 30 course credits (after BS: allow up to 6 credits at ECE 400 level)

[ ] **ECE 599 Graduate Seminar** (0 credit) *(Required for Thesis Track, Optional for Non-Thesis Track)*

[ ] Minimum GPA of 3.000/4.0 (400-level $\geq$ “B” and 500/600-level $\geq$ “C”)

[ ] Four Core Courses
  
  - MSCPE: ECE 560; ECE 562; ECE 565; Math course: _________________
  - MSELE: ECE 521; ECE 530; ECE 551; ECE 571 or ECE 574

I plan to satisfy the Depth requirement with the following two courses: ________________, ________________

I plan to satisfy the Breadth requirement with the following course: _________________

I plan to satisfy the Free Elective requirement with the following course(s): __________, __________, __________

Selection of Advisor of Graduate Studies: _________________ *(Input your advisor name)*

**MS Agreement** *(Choose one)* *(Input the semester for each milestone task below the chosen track, e.g., Spring 2023)*

[ ] Thesis Track: **ECE 600 Master’s Thesis** (6 credits)
  
  - Selection of Committee of MS Thesis: _________________
  - Proposal according to “Thesis/Project Proposal Format”: _________________
  - Oral defense of MS Thesis: _________________

[ ] Non-Thesis Track: (Choose one)
  
  [ ] **ECE501 Master’s Project** (3 credits)
    
    - Proposal according to “Thesis/Project Proposal Format” _________________

  Waive ECE501:
  
  [ ] Two-year working experience (attach resumé)
  
  [ ] **EGR 500 Engineering Graduate Internship** (3 credits)

Student Signature: ____________________________ Date: __________________________

Advisor Signature: ____________________________ Date: __________________________

Approval: ____________________________ Date: __________________________

ECE Graduate Program Director