

COMPUTER SCIENCE COMPREHENSIVE EXAMINATION

I, _____, hereby make application for the master's comprehensive examination during (check one):

- Fall Semester 2** _____ (Form due by October 1st.)
 Spring Semester 2 _____ (Form due by March 1st.)
 Summer Session 2 _____ (Form due 1st week of the session.)

At the conclusion of the current semester, I will have completed _____ credits for my master's degree in Computer Science.

Written Comprehensive Examination
Who Will Write Comprehensive Questions

Oral Comprehensive Examination Committee
(For those completing a thesis)

Advisor (see note below)

Thesis Advisor

Member

Member

Member (if needed)

Member

Student Name: _____

Address: _____

Phone Numbers: Home (____) _____ Work (____) _____

Computer ID Number: _____

Email address: _____

Advisor's Approval: _____

Date: _____

NOTE: advisor always serves as chair of your written comprehensive examination committee, but may or may not write questions. A minimum of two people must submit questions.

Revised 07/26/11