UC IRVINE - SCHOOL OF ENGINEERING
M.S. PLAN OF STUDY

Degree: Master of Science in Electrical and Computer Engineering Effective Fall 2005
Concentration: **Electrical Engineering**

Name, (Last, First)	
Local Address	
Student ID Number	Campus Phone
E-mail Address	Work Phone

Quarter Expected to Graduate: _____ Year _____

COURSE WORK

Minimum of 36 units required

Please check which OPTION you are following:

Core Courses

Circuits and Devices:
EECS 270A, EECS 270B, EECS 277A, EECS 277B, EECS 280A, EECS 285A

Systems:
EECS 240, EECS 241A, EECS 250, EECS 251A, EECS 260A, EECS 267A

☐ **THESIS OPTION**

Concentration Course Requirement
Minimum of 7 courses from list of concentration courses

Course	Units	Grade	Qtr/Yr	Institution

Remaining Units:

No more than 12 units EECS 296,
No more than 4 units of EECS 299
No more than 3 units of undergraduate electives

Course	Units	Grade	Qtr/Yr	Institution

Examination Committee: (print names)
Chair
Member 2
Member 3

☐ **COMPREHENSIVE EXAM OPTION**
Minimum of 12 courses required

Concentration Course Requirement
4 of the 6 core courses in your field
5 additional concentration courses

Course	Units	Grade	Qtr/Yr	Institution
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				

Remaining Units:
Minimum of 12 courses
Minimum of 2 units of EECS 294 required
No more than 3 units of EECS 299
No more than 6 units of undergrad electives

Course	Units	Grade	Qtr/Yr	Institution
EECS 294	1			
EECS 294	1			
10)				
11)				
12)				

Signature of Candidate Date

_____ _____
Faculty Advisor Signature Date Graduate Advisor Signature Date

*This form must be submitted at least **TWO** quarters prior to completion of degree requirements.*
*Advancement to Candidacy form is required **ONE** quarter prior to graduation*