

UC IRVINE - SCHOOL OF ENGINEERING

M.S. PLAN OF STUDY

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

Effective Fall 2005

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									
<input type="checkbox"/> THESIS OPTION					<input type="checkbox"/> COMPREHENSIVE EXAM OPTION Minimum of 12 courses required				
Concentration Course Requirement Minimum of 7 courses from list of concentration courses					Concentration Course Requirement 4 of the 6 core courses in your field 5 additional concentration courses				
Course	Units	Grade	Qtr/Yr	Institution	Course	Units	Grade	Qtr/Yr	Institution
					1)				
					2)				
					3)				
					4)				
					5)				
					6)				
					7)				
					8)				
					9)				
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					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	Course	Units	Grade	Qtr/Yr	Institution
					EECS 294	1			
					EECS 294	1			
					10)				
					11)				
					12)				
Examination Committee: (print names)					Signature of Candidate _____ Date _____				
Chair									
Member 2									
Member 3									

_____ Faculty Advisor Signature Date	_____ Graduate Advisor Signature Date
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*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*