UMBC COMPUTER SCIENCE GRADUATE PROGRAM OF STUDY

To be Filled by:

1. Full-time M.S. students by Second semester in residence (April 15 or Nov 15)
2. Part-time M.S. students by April 15/Nov 15 in the semester they complete 15 credit hours
3. Ph.D. students by the end of FOURTH semester in residence (May 31 or Dec. 31), if
   ApI to Candidacy has not already been submitted

Name (Last, First, M.I.) ___________________________ Student ID # _______________________

E-mail address ___________________________ Semester that you entered UMBC Grad. Prog. _______________________

Degree being sought ___________________________ Expected month/year of graduation _______________________

M.S. students circle one: Thesis option / Non-Thesis option

Research Advisor ___________________________

Important: Have you submitted final transcripts and degree certificates from ALL your previous institution to the Department and Graduate School? YES / NO (Circle one). If NO, please do so immediately.

COURSES TAKEN/PLANNED TO SATISFY DEGREE REQUIREMENTS

Use additional sheets if necessary

<table>
<thead>
<tr>
<th>Year</th>
<th>Semester</th>
<th>Title of Course and Number</th>
<th>Course Acronym and Number</th>
<th>Grade Received</th>
<th>Credit Hours</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Required Core Courses</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Advanced Computer Architecture</td>
<td>CMSC 611</td>
<td>3</td>
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<td></td>
<td></td>
<td>Advanced Operating Systems</td>
<td>CMSC 621</td>
<td>3</td>
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<td></td>
<td>Design and Analysis of Algorithms</td>
<td>CMSC 641</td>
<td>3</td>
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<tr>
<td></td>
<td></td>
<td>[Breadth course] CMSC</td>
<td>CMSC 641</td>
<td>3</td>
<td></td>
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</tbody>
</table>

List Credits from Other Institutions Approved/Accepted Towards Degree

List All OTHER Courses Completed for Graduate Credit at UMBC

List OTHER Graduate Courses in Which You are Currently Enrolled

List OTHER Graduate Courses Planned to Complete Degree Requirements

Total credit hours: _______________________

Ph.D STUDENTS COMPLETE THIS SECTION

Comprehensive Exams:
- Passed
  Month/Year Passed: ________________________________
- Not taken
  Month/Year Planned: ________________________________
- Not passed
  Month/Year Retake Planned: ___________________________

Prelim Exam Date: __________________________________________________________________________ (Enter Planned Date, if not completed)
  Month/Year

Admitted to Candidacy: ________________________________________________________________________ (Enter Planned Date, if not completed)
  Month/Year

ALL STUDENTS COMPLETE SIGNATURE SECTION

_____________________________  __________________________
Signature of Student                  Date

_____________________________  __________________________
Signature of Research Advisor        Date

_____________________________  __________________________
Graduate Program Director            Date