Request for Graduation

Student

Student ID#: ____________________       Date Submitted: ____________________

Student Name: ____________________________________________________________

(Last) ____________________        (First) ____________________

Program: ____________________       Anticipated Graduation Date: ______________

If PhD student, following: OLD Requirements (2016) or NEW Requirements (2017) (Circle One)

If PhD student, please list major area and minor area:

Major Area: ____________________
Minor Area: ____________________

If PhD student, did student enter program with Bachelor Degree or Master Degree (Circle One)

If Master student in accelerated program, list graduate courses taken at undergraduate level:

Course
1. ____________________       Semester Taken ____________________
2. ____________________       ____________________

If Master student, select: Thesis or Non-Thesis (Choose One)

Did student complete work at BNL: Yes or No (Circle One)

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Graduate Program Coordinator

Name: ____________________       Signature: ____________________

Date submitted to Graduate School: ____________________

Department of Electrical and Computer Engineering

9/1/2017