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

Degree: Master of Science in Electrical and Computer Engineering   Effective Fall 2006
Concentration: **Computer Systems and Software**

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:

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

Core Course Requirement:
Choose 4 of the following 6 core courses:
EECS 211, EECS 213, EECS 215, EECS 217,
EECS 218, EECS 248A

Course	Units	Grade	Qtr/Yr	Institution	Course	Units	Grade	Qtr/Yr	Institution
					1)				
					2)				
					3)				
					4)				

Concentration Course Requirement:
THESIS: Choose **3** additional courses from the core courses or concentration courses listed in the catalog.
COMPREHENSIVE: Choose **4** additional courses from the core courses or concentration courses listed in the catalog.

Course	Units	Grade	Qtr/Yr	Institution	Course	Units	Grade	Qtr/Yr	Institution
					5)				
					6)				
					7)				
					8)				

Remaining Units:
THESIS:
No more than 12 units of EECS 296
No more than 4 units of EECS 299
No more than 3 units of undergraduate electives

COMPREHENSIVE:
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			
					9)				
					10)				
					11)				
					12)				

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