Autumn 2001
BACHELOR OF SCIENCE DEGREE CANDIDATE
DEPARTMENT OF ELECTRICAL ENGINEERING
STUDENT INFORMATION FORM

Name: __________________________ S.S.# or CUID: _______________________

Email: ________________________ Telephone: ___________________________

Country of citizenship: ___________ Visa Type: ___________________________

Sophomore ( ) 
Junior ( ), Senior ( ) 
Male ( ), Female ( )

Date degree expected: _______________

Academic advisor: __________________________

PROJECTS
If you are registering for the project course (EE E3998), please give the name of the faculty member who
is supervising your project. __________________________

GRADUATION
If you plan to graduate in February 2001, the ABET Curriculum Sheet must be completed, signed by your
faculty advisor and placed in your departmental file one month before the end of the term in which you
wish to graduate

US CITIZENS AND PERMANENT RESIDENTS ONLY:
We are periodically required to supply the following information to state and federal agencies. Federal and
state reporting procedures designate the following groups. If you feel that none of these items aptly
describe your background, please respond in your own terms. Check one

Ethnic Origin (optional):

Alaskan/American Indian

Asian American

Black American

Hispanic American

East India American

Mexican American

Puerto Rican

White American

Other

Unknown (specify if desired)