

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:** _____

Date degree expected: _____

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

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) _____