

CALIFORNIA STATE UNIVERSITY, LOS ANGELES

COLLEGE OF ENGINEERING, COMPUTER SCIENCE, AND TECHNOLOGY

Department of Electrical & Computer Engineering

APPLICATION FOR: COMPREHENSIVE EXAMINATION (EE 5960)

Date: _____ Class # _____ Section # _____

Term: Fall Winter Spring Summer Year: _____

Last Name: _____ First Name: _____ CIN: _____

Address: _____

City/State: _____ Zip Code: _____

Telephone: (Home) _____ Business: _____ Email: _____

1. Comprehensive Examination Committee Members

- Chairperson of Committee _____ Date _____
- Faculty _____ Date _____
- Faculty _____ Date _____

3. a. List of topics to be covered by the comprehensive examination, if applicable.

4. Approved: _____
Department Chairman **Date**

Note*** The Comprehensive Examination may be taken only two (2) times and in your last Term in attendance.