

EE 767 Registration Request Form

Student Information:

Student ID: _____

Name (Last/First): _____

Term of Registration: _____

Email: _____

Expected Graduate Date: _____

Core Courses Completed:

☐ EE 611 (sem/grade ____ / ____) ☐ EE 621 (sem/grade ____ / ____) ☐ EE 640 (sem/grade ____ / ____)

☐ EE 661 (sem/grade ____ / ____) ☐ EE 685 (sem/grade ____ / ____)

Other Courses Completed towards PhD Degree:

List Courses Completed: _____

Cum GPA: _____

Total hours completed towards PhD: _____

Number of Previous terms of EE 767: _____

PhD Dissertation:

Dissertation Title (anticipated): _____

PhD Adviser: _____

Qualifying Exam & Annual Review:

Date written pre-qualifying exam passed (if applicable): _____

Date of oral qualifying exam: _____

Date of most recent PhD annual review: _____

Student Signature: _____ Date: _____

Please return or e-mail this form to: Director of Graduate Studies, Dept. of Electrical and Computer Engineering, University of Kentucky, 453 F. P. Anderson Tower, Lexington, KY 40506-0046.