



Application for the Fifth-Year
Master of Science in Machine Learning
School of Computer Science
Carnegie Mellon University

Personal Data

Mr. ☐ Ms. ☐ Mx. ☐ _____
Family Name Given Name and Middle Name (if any)

_____ Are you a U.S. citizen or permanent resident of the U.S.? Yes ☐ No ☐

Andrew ID _____

_____ Date of Birth _____ Country of Citizenship _____ Visa Type (if not U.S. citizen or permanent resident) _____

_____ Anticipated Graduation Semester _____ Desired Program Entry Semester _____

Contact Data

_____ Current Address _____ Permanent Address (if same as current, leave blank) _____

_____ Telephone _____

_____ Home Department _____ Advisor _____

Courses that you have/will have taken as an undergraduate for the Fifth-Year Master's Program:

Course Number	Semester	Grade (if any)	Course Number	Semester	Grade (if any)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Letter of recommendation writers:

_____ Name _____	_____ Title and Affiliation _____
_____ Name _____	_____ Title and Affiliation _____

Email your form, statement of purpose, resume, and transcript to Dorothy Holland-Minkley (dfh@cs.cmu.edu).

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Signature Date

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Inquiries concerning the application of and compliance with this statement should be directed to the university ombudsman, Carnegie Mellon University, 5000 Forbes Avenue, Pittsburgh, PA 15213, telephone 412-268-1018.