RUTGERS UNIVERSITY
The State University of New Jersey
Graduate Program in Electrical and Computer Engineering

APPLICATION TO TAKE GRADUATE SPECIAL PROBLEMS

Student Name (Print): _____ Date: _____

Email Address: _____ RUID: _____

Term of Special Problems Registration (circle one):   Fall   Spring   Summer   Year: _____

Number of Credits Desired: _____   Degree Sought (circle one):   MS   PhD

Name of Professor Supervising Your Work (print): _____

If supervisor is outside the ECE Dept., name of Dept.: _____

Approval Signature of Supervising Professor: _____

Important Information for Students:

After this form has been completed with all required signatures it must be submitted to the ECE Graduate Program Coordinator in room 134B of the Electrical Engineering building. Failure to do so could result in deregistration from the roster or receipt of a failing grade.

NOTE: Submission of this form DOES NOT constitute REGISTRATION. You must register using the standard registration procedure for the ECE Course Special Problems (601 or 602).

Student Signature: _____ Date: _____