

Graduate Project Approval Form

Department of Computer Science Southern Illinois University Carbondale 04/25/2017 Date

I hereby recommend that the project prepared under my supervision by

MAHESH CHANDRA REBBA

Topic Title UAV SURVEILLANCE FOR CAMPUS SECURITY

be accepted in partial fulfillment of the requirements for the degree of **Master of Science**

	In Charge of Project
Recommendation concurred in	
1.	-
2.	Committee
	for the
3	Graduate Project

Computer Science Exit Survey

Date : 04/25/	2017								
Name: MAH	ESH CH	HANDRA REBBA		Stude	ent ID # <u>853</u>	932490	0		
Check your Co	omputer S	cience degree program:	B.A.	B.S	M.S.	Ph.D.			
Check one: I	will be gra	aduating this Semester:	YES 🗸	NO					
Project Adviso	or: Dr. H	ENRY HEXMOOR							
		Or. BIDYUT GUPTA							
		JRVEILLANCE FOR		S SECURI	TY				
Troject Title.									
Part I. Stude	ent Conta	act Information							
year from now expect to move	<u>v</u> . This m within th	•							
		IANDRA REBBA			-				
Address: 258	Conver	ntion Drive,							
Fair	view, Te	exas			-				
					-				
Telephone:	Home				-				
F	Work								
	Cell	618-303-6949							
Email: mahe	shc78@	gmail.com							
Please rate yo	ur EXPEC	sessment of the Prog CTATIONS (EX = Exceed CS programs regarding	$ds; MT = Me\epsilon$		rginally Acce	ptable; U EX	'N = MT	MA	UN
The advisemen	nt quality	in the department.							
		-							
rne program p	reparea n	ne for my career.							
The quality of	the educa	tion I have received in the	e departmen	t.		'			

CS Exit Survey Page 1 of 2

Write any recommendations you have to improve the Computer Science program:

Part III. Student Career Plans

If you have decided to pursue a graduate or professional	degree, please provide the fo	ollowing information:
School:		
Major:	Scholarship/Assistantship:	
If you have started searching for employment, please pro	vide the following informatio	on:
Number of months searching:	_	
Number of Interviews you had:	_	
Number of job offers obtained:	_	
Average starting salary offered:	_	
If you have already accepted an offer, please provide the	following information if pos.	sible:
Company:		_
City:		_
Position/Title:		_
Your company contact information (if available):		
Web address:		
Starting salary:		
Part IV. Job Networking		
May we refer future students to you for questions regarding	ng the CS field as a career?	YES 🖊 NO
Can these students use you as a contact for possible job p	rospects?	YES NO NO

**Thank you for providing this information and any offer of assistance to our future students. **

Date: 04/25/2017

Department of Computer Science Master of Science

1.1.1 PLEASE ASSESS THE OUTCOMES USING THE SCALE BELOW.

Outcome 5	Ability to continue professional development by educating themselves throughout their careers.			
Outcome 5 Assessment	Exceeds Expectations	Meet Expectations	Marginally Acceptable	Unacceptable
Outcome 6	Demonstrating a significant contribution to the field of computer science through their research including current and possible future applications of their research.			
Outcome 6 Assessment	Exceeds Expectations	Meet Expectations	Marginally Acceptable	Unacceptable
Outcome 7	Ability to communicate effectively to both technical and non-technical audiences; prepare and give effective technical presentations. Write clear and concise technical documents.			
Outcome 7 Assessment	Exceeds Expectations	Meet Expectations	Marginally Acceptable	Unacceptable