

University of Massachusetts Amherst
College of Engineering
Department of Electrical and Computer Engineering
Flexible Masters Program in Electrical and Computer Engineering
Application Form

| | | |
|---|--------------------|-----------------|
| Last Name: | First Name: | Middle Initial: |
| Email: _____@umass.edu | Student ID Number: | Date of Birth: |
| Preferred academic advisor for M.S. (optional): Prof. | | |

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|---|---|
| Please indicate the area within ECE that you are pursuing for your M.S. (check one) | <input type="checkbox"/> Computer Engineering <input type="checkbox"/> Microwave Engineering |
|---|---|

Please state briefly why you want to pursue an M.S. in ECE, and when you think you will start taking classes.

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|--|-------|
| I hereby apply for admission to the Flexible Masters Program in Electrical and Computer Engineering. | |
| Applicant Signature (type your name here): | Date: |

Please return completed form and a PDF of an unofficial transcript to Prof. Pishro-Nik (pishro@umass.edu).

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|---|-------|------------------------|
| For use by review committee (do not fill out) | | |
| Completed B.S. degree: <input type="checkbox"/> yes <input type="checkbox"/> no, will graduate: _____ | GPA: | |
| Committee decision: <input type="checkbox"/> admitted <input type="checkbox"/> not admitted | | |
| Signature: | Date: | Applicant notified on: |