



Department of Electrical and Computer Engineering  
Graduate Studies Office



**BS/MS Mentor & Recommendation Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

UID: \_\_\_\_\_ Email: \_\_\_\_\_

Current BS GPA: \_\_\_\_\_ BS Major: \_\_\_\_\_ Semester of BS graduation: \_\_\_\_\_

MS Program option:  THESIS  NON-THESIS

MS Major: \_\_\_\_\_ MS minor: \_\_\_\_\_

Comments:

***By signing below, I attest to the fact that I have reviewed the above student's BS/MS Plan of Study Form, and I approve it in the context of the student's overall academic goals. My signature also indicates my recommendation of this student for enrollment in an ECE BS/MS program as well as my agreement to serve as this student's BS/MS mentor at least until BS graduation.***

ECE Faculty Mentor (print name): \_\_\_\_\_

ECE Faculty Mentor (signature): \_\_\_\_\_ Date: \_\_\_\_\_