Joint BS/MS Degree Program Audit Form

Section A (for student to complete and bring to advisor):

Student Name: ____________________________________ Z#: _________________________
Email: _________________________________ Phone No. : _____________________________
Starting Date at FAU: __________ Undergraduate Advisor: ______________________________
GPA (Overall): ______________________

**Anticipated date for starting the Master’s Degree Program (The First Semester AFTER completion of your Bachelor’s Degree):** ______________________________

Anticipated Major for the Master’s Degree Program:
CSC___/COEN___/EEL___/ARIN___/BIEG___

Have you completed your On-Line Application for the Master’s Degree Program?
Yes _______   No _________

List any 5000 or 6000 level courses that you plan to take during your undergraduate degree:

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<th>Course Number</th>
<th>Course Name</th>
<th>Credit Hours</th>
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Section B (for departmental use only):
Please check that student meets the following criteria:

_____ Cumulative GPA of 3.25 or higher
_____ Completed at least 90 credits
_____ Continuous enrollment from BS to MS

____________________________________  _____________________________
Undergraduate Advisor                Date

____________________________________  _____________________________
Graduate Coordinator                  Date

Please provide completed and signed copy to Jean Mangiaracina, FAU Boca Raton campus, Engineering East (EE), room 403 or email to ceeecs@fau.edu.