

## 2023-2024 STUDENT ANNUAL REVIEW

MS Students in Computer Science – **due July 31, 2024**

Please email the complete form to [Marlene](#) and your Faculty Advisor if applicable

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

SID \_\_\_\_\_ Project/Thesis Advisor (if applicable) \_\_\_\_\_

Degree Objective:    \_\_\_ MS    \_\_\_ BS+MS                      Quarter/Year admitted to program \_\_\_\_\_

Have you taken all require courses?    \_\_\_ Yes    \_\_\_ No                      If no, when will you be done? Qtr/Yr \_\_\_\_\_

Cumulative GPA (at end of *Spring 24*) \_\_\_\_\_                      Academic warning/probation Qtr/Yr (if applicable) \_\_\_\_\_

**MS Student Milestones**

Indicate your option to graduate:    \_\_\_ Comprehensive Exam    \_\_\_ Project    \_\_\_ Thesis    Expected completion Qtr/Yr \_\_\_\_\_

If you selected the MS Comprehensive Exam option, list details below:

Core course(s) taken (*select all that apply*)    \_\_\_ CS 201    \_\_\_ CS 202    \_\_\_ CS 203    \_\_\_ CS 215    \_\_\_ CS 218    \_\_\_ CS 220

Number of CEP question(s) passed \_\_\_\_\_

**Accomplishments** (*use additional sheet if necessary*)

List honors, fellowships, awards or other recognition during the 2023-24 academic year? \_\_\_\_\_  
 \_\_\_\_\_

How many papers have you submitted during this review period? \_\_\_\_\_

Please list all accepted papers during this period \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

List all Professional Conferences and Workshops Attended \_\_\_\_\_  
 \_\_\_\_\_

**Internship**

Did you apply for Curricular Practical Training (CPT)?    \_\_\_ Yes    \_\_\_ No    If yes, Qtr/Yr \_\_\_\_\_

Company	Location	Position	Start/end date
_____	_____	_____	_____
_____	_____	_____	_____

**TO BE COMPLETED BY FACULTY ADVISOR** (*in collaboration with MS on project/thesis option only*)  
 MS students in the comprehensive exam option will be reviewed by the Graduate Advisor

Please rate your advisee’s progress:    \_\_\_ Excellent    \_\_\_ Excellent/Good    \_\_\_ Good    \_\_\_ Good/Fair    \_\_\_ Fair    \_\_\_ Poor

What is your advisee’s next milestone? When do you expect him/her to meet this milestone?

\_\_\_ Comprehensive Exam    \_\_\_ MS Project    \_\_\_ MS Thesis                      Quarter/Year \_\_\_\_\_

Where do you think the student could improve his/her performance (*if applicable*)? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional comments (*use additional sheet if necessary*) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Faculty Advisor’s or Graduate Advisor’s name

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date