Graduate Coordinator Signature

Section No. ____________________________

Department Code ____________________________

Registered In: ____________________________

Department Supervisor (If Primary is external)

Primary Supervisor ____________________________

To Instructor:

At the end of the semester, submit a brief report to the course coordinator. The report will be on the basis of Credit/No Credit. No letter grades will be given. The grade received will be either Credit or No Credit. The grading will be based on the performance of the student in the course. The results of the evaluation will be sent to the instructor for review. The instructor will determine the final grade for the student.

Date ____________________________

Description of proposed project of study program:

Department Supervisor (If Primary is external)

Primary Supervisor ____________________________

Internship □ Tech Elective □ Other □ Not Used □

Number of units: ________ These units are to be used for degree work.

Regular Session Open University Special Session

Semester ____________ ________ ________ ________

Phone Number ________ ________ ________ ________

Student ID ________ ________ ________ ________

Last Name ________ ________ ________ ________

First Name ________ ________ ________ ________

Date ____________________________

To Students:

CPEE 294

Computer Engineering

Sjsu