**Student Information**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last Name:** |  | | **First Name:** | |  | **SID:** |  | | |
| **Email:** |  | | | | | **Phone:** |  | | |
| **Semester/Year You Began Program:** | |  | | **Did you defer admission for a semester?** | | | |  |

***For 5th Year MS Requirement details, please see:***[***http://www.me.berkeley.edu/graduate-student-handbook/53-5th-year-masters-science-degree-requirements***](http://www.me.berkeley.edu/graduate-student-handbook/53-5th-year-masters-science-degree-requirements)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **OVERALL COURSE UNIT REQUIREMENT** | | | | |  | **MECHANICAL ENGINEERING UNIT REQUIREMENT** | | | |
| ***Please list ALL of the courses you wish to use for your degree below. This program requires 24 units in 100 or 200 series.*** | | | | |  | ***Please list below the courses you have used and plan to use to fulfill your 12 units of ME-Sponsored courses requirement.  These all must be letter-graded.*** | | | |
| **Course** | **Sem/Year** | **Grade\*** | | **Units** |  | **Course** | **Sem/Year** | **Grade\*** | **Units** |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |  |
|  |  |  | |  |  |  |  | **Total Units:** |  |
|  |  |  | |  |  |  |  |  |  |
|  |  | **Total Units:** | |  |  | **BACKDATED COURSE** | | | |
| ***\*For courses in progress, you may list an “IP” for the grade*** | | | | |  | ***You may use up to 4 units from your LAST semester from your undergraduate degree if you did not use those units towards your undergraduate degree*.** | | | |
| **ORAL EXAMINATION INFORMATION** | | | | |  | **Course** | **Sem/Year** | **Grade\*** | **Units** |
| **First Member:** |  | | | |  |  |  |  |  |
| **Second Member:** |  | | | |  |  |  |  |  |
| **Proposed Date:** |  | | | |  |  |  |  |  |
| **Proposed Time:** |  | | | |  |  |  | **Total Units:** |  |
| **Would you like Meche Student Services to book a room for you?** | | |  | |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Student Signature:** |  | **Date:** |  |

|  |
| --- |
| **Staff & Faculty Comments/Notes** |
|  |