

THE UNIVERSITY OF TENNESSEE, KNOXVILLE (UTK) INTERDISCIPLINARY
GRADUATE MINOR IN COMPUTATIONAL SCIENCE (IGMCS) PROGRAM

STUDENT PROGRAM FORM

Instructions: To enroll in the program, fill out sections 1 through 7 below and submit to the IGMCS Program Committee Chair. If you have already completed at least one semester of study, also submit a copy of your transcript(s) (from UTK and/or other institution) and Admission to Candidacy form, if available. Upon completion of the IGMCS Program, fill in section 8 below. See the website for more information – <http://igmcs.utk.edu/>

1. Student name _____ ID _____ Date _____
2. Address _____ Phone # _____
City _____ State _____ Zip _____ e-mail _____
3. College/Dept./Program _____ / _____ / _____
4. Degree Objectives: Doctoral Masters Target Completion Date _____
5. Advisors: Major _____ IGMCS _____
Campus Address: _____

Note: The student's graduate committee must include an IGMCS Program Faculty Member.

6. IGMCS courses required for the minor:

COURSE NUMBER and NAME	DEPT.	SEMESTER / YR	GRADE
6a. Masters (9 hrs) _____			
_____	_____	_____	_____
_____	_____	_____	_____
6b. Doctoral (15 hrs) _____			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. Approval of IGMCS program plan (to be completed prior to or during IGMCS program) – **signatures required**

- a. Major advisor _____ Print _____ Date _____
- b. Departmental IGMCS advisor _____ Print _____ Date _____
- c. IGMCS Program Committee Chair _____ Print _____ Date _____

Copies to: Student, signers, major dept., and Graduate School

8. Approval of completion of requirements for IGMCS program (to be completed after meeting IGMCS program requirements) – **signatures required**

- a. Completion of Major courses:
Major advisor _____ Print _____ Date _____
- b. Completion of IGMCS program courses:
IGMCS advisor _____ Print _____ Date _____
- c. Major portion of comprehensive exam passed:
Major advisor _____ Print _____ Date _____
- d. Notification of completion of IGMCS program:
IGMCS Program Committee Chair _____ Print _____ Date _____

Copies to: Student, signers, major dept., and Graduate School