

Coursework Certification Form

1. Student Information

<input type="text"/>		<input type="text"/>
NAME		UTK STUDENT ID NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>
UTK E-MAIL ADDRESS	PHONE NUMBER	TARGET GRADUATION SEMESTER/YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>
COLLEGE	DEPARTMENT	MAJOR/PROGRAM
DEGREE OBJECTIVE	<input type="text"/>	<input type="text"/>
<input type="radio"/> MASTERS 9 hrs <input type="radio"/> DOCTORAL 15 hrs	MAJOR ADVISOR NAME	DEPARTMENTAL IGMCS LIAISON
	<input type="text"/>	Find at https://igmcs.utk.edu/departments
	MAJOR ADVISOR E-MAIL ADDRESS	
	<input type="text"/>	

2. Completed Course List See eligible courses list at <https://igmcs.utk.edu/courses>

			IGMCS AREA				
DEPARTMENT PREFIX COURSE CODE & COURSE NAME <small>Example: COSC 522 Machine Learning</small>			SEMESTER & YEAR	GRADE <small>If Available</small>	COSC/ INSC	MATH/ STAT	DOMAIN SCIENCE
MASTERS	DOCTORAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

After completing sections 1 & 2, submit this form to: igmcs@utk.edu

3. Signatures

A. MAJOR ADVISOR	<input type="text"/>	<input type="text"/>	<input type="text"/>
	NAME	SIGNATURE	DATE
B. DEPARTMENTAL IGMCS LIAISON	<input type="text"/>	<input type="text"/>	<input type="text"/>
	NAME	SIGNATURE	DATE
C. IGMCS PROGRAM COMMITTEE CHAIR	<input type="text"/>	<input type="text"/>	<input type="text"/>
	NAME	SIGNATURE	DATE