

Northeastern University
Department of Electrical and Computer Engineering
Qualifying Exam Registration Form
(Please complete, save as pdf, and email to f.crisley@neu.edu)

Date form completed: _____

Last Name: _____ First Name: _____ NUID: _____

Husky email address: _____

Program of study: PhDEE PhDCE

Concentration for the qualifying exam: _____

Who is your research advisor (if you have one)? _____

First semester enrolled in the Ph.D. program at NU: _____

Highest degree held when admitted to the PhD program at NU: MS BS

University from which you received your highest degree: _____

Date your highest degree was received: _____

Status: Full-time Part-time

Is this your first attempt in taking the qualifying exam: Yes No

GPA: _____ Number of SH passed at NU: _____