



WPI

Department of Electrical
and Computer Engineering

ECE Doctor of Philosophy Plan of Study Form

Student ID Number: _____ Full Time _____ Part Time _____
(please check one)

Student Name: _____
(last) (first) (middle)

Address (home): _____

City _____ State _____ Zip _____

Home Phone: _____ or cell #: _____ Email _____

Research Advisor (please print): _____

*Required 30 credits (minimum amount) for ECE 699 Ph.D. dissertation
(more can be taken in fulfillment of Ph.D. degree requirements)*

Course No.	Course Title	Term / Year	Grade	Credits
ECE 699	Ph.D. Dissertation			
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ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			
ECE 699	Ph.D. Dissertation			

*Required 18 credits (maximum amount) of other coursework and/or dissertation
contributing to the 60 credits total for Ph.D. requirements*

Course No.	Course Title	Term / Year	Grade	Credits

*Required 6 credits for first minor (courses cross-listed with ECE do not count;
(physics, math, computer science, and engineering are recommended)*

Course No.	Course Title	Term / Year	Grade	Credits

Required 6 credits for second minor (courses cross-listed with ECE do not count;
 (physics, math, computer science and engineering are recommended)

Course No.	Course Title	Term / Year	Grade	Credits

Required two enrollments in ECE graduate seminar courses (full-time Ph.D. students only)

Course No.	Course Title	Term / Year	Grade	Credits
ECE 596 ____	Graduate Seminar (full time students only)			
ECE 596 ____	Graduate Seminar (full time students only)			

Extra courses; does not count towards Ph.D. degree requirements

Course No.	Course Title	Term / Year	Grade	Credits

Total number of credits for this degree expected by graduation: _____

Examinations for Ph.D. Degree:

Date	Examination	Committee, Chair	Result
	<i>Diagnostic Examination</i>		<i>Pass / Fail</i>
	<i>Area Examination</i>		<i>Pass / Fail</i>
	<i>Dissertation Defense</i>		<i>Pass / Fail</i>

Tentative Dissertation Title: _____

Approvals: (subject to confirmation by the Registrar)

Student Signature: _____ Date: _____

Research Advisor Signature: _____ Date: _____

Instructions:

This form should be completed (*please type or print in ink*) by the student and approved by the student's research/academic advisor within the first year after admission to the PhD program. Completed form should be submitted to *Colleen Sweeney* in the ECE office.

A copy of this form will be kept in your file and can be updated at any time.