

PROGRAM APPROVAL FORM

MASTER OF SCIENCE IN COMPUTER SCIENCE

STUDENT INFORMATION					
Student ID:	First N	ame:	Surnar	me:	_
Email:	@unbc.ca	Admit Date:	Sta	ıtus: ☐ Full-time ☐ Part-tim	e
COURSE	INFORMATION				
elective requirem	nent. Project students in one of their electives. D	Physics or a combina	ation of study areas	lent studies can be counted to including Physics are expect aduate Calendar online.	
Course # Title Creative Creati					
Semmar.	1.5 credits, taken twice	- Choose nom BCMB	704, CHEW 714, CF	-30 704, MATTI 704, MOFM	3
Select One:	_ *	793 MSc Proje			6
Flectives (Choo	☐ Thesis CPSC ose 12 credit hours for			he nroiect nath)·	12
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			Total Cr	edits (27 credits required):	
Additional required courses or changes to the program of study (supplemental information may be attached if needed):					
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APPROVA	AL SIGNATURES				
Student Signat	ure:		Date:		
Supervisor Name:		Signature:		Date:	
Co-Supervisor Name (if any):		Signature:		Date:	
Program Chair:		Signature:		Date:	
OGP USE ONL	Y Dean's review required?	No Yes - date subm	itted for review:	Intials:	
DEAN'S DECISION □ Approved		☐ Additional information required		☐ Denied	
Print Name:		Signature:		Date:	