



College of Graduate Studies and Research

Academic Course Record: Master of Science in Computer Science

Computer Science Concentration

NEIU ID #	Last Name	First Name

Indicate the term taken and grade received for the following required courses:

TERM TAKEN	DEPT.	COURSE NUMBER	COURSE NAME	CREDITS	GRADE	OFFICE USE
	CS	400	Discrete Modeling and Analysis	3		
	CS	404	Analysis of Algorithms	3		
	CS	325	Theory of Computation	3		
	CS	331	Computer Networks	3		
	CS	401	Software Engineering	3		
	CS	402	Advanced Systems Programming	3		
	CS	408	Advanced Operating Systems	3		
	CS	409	Topics in Compiler Theory	3		
			ELECTIVE			
			ELECTIVE			
			ELECTIVE/THESIS			
			PROJECT/THESIS			

List any course substitutions or transfer courses that have been APPROVED for use towards your degree:

TERM TAKEN	DEPT.	COURSE NUMBER	COURSE NAME	CREDITS	GRADE	OFFICE USE

Outstanding Requirements: Project Thesis Other: _____

Student Signature

Date

Program Advisor Name

Program Advisor Signature

Date