Instructions for Completing the Master’s Project (0 Credit Hours)

All students not electing to submit a thesis for the master’s degree in Computer Engineering or Electrical Engineering must complete a Master’s Project according to one of the following plans:

**Plan A - Paper Review**

The Student selects a faculty adviser and a topic appropriate to the student’s major area of graduate study. Together they choose a significant journal paper, preferably from the current literature, relevant to the student’s topic. The student is required to study the paper (and any additional references), and write a Report on the subject of the paper. The Report should include: an analysis and evaluation of the chosen journal paper, a discussion of its method, and conclusions. The Report may include illustrative examples, if appropriate. A copy of the original paper should be attached.

(At the discretion of the adviser, a Paper Review may be expanded into an Independent Study course for credit, with a review, critique of a series of papers, and a more extensive written Report).

**Plan B - Engineering Investigation**

After a prior agreement with a faculty adviser, the student may submit a written report on original research, or other engineering or scientific investigation, that the student has carried out. (Where the level of faculty guidance is substantial, appropriate concurrent registration in an Independent Study course may be appropriate).

The Master’s Project is to be completed no later than the final semester of coursework for the Master’s degree. **Students should register for ELE 996 or CSE 996.** Students should register for Master’s Project only once. If the Master’s Project is not completed during the semester of registration, and the student is not registered for any coursework, the student should register for **GRD 998: Degree in Progress**, to maintain their student status and remain in the program.

**Format Guidelines**

The Report must have a title page bearing 1) the word REPORT, 2) the report title, 3) an indication that the purpose of the report is to fulfill the Master’s Project requirement for the MSCE or MSEE degree (state which), 4) the student’s name, 5) the student’s SUID, 6) the date of the report, and 7) the signature of the adviser. If the report is the analysis of a single journal paper, then a copy of the paper should be attached. Reports and attachments should be bound or stapled.

The one-page Summary must contain: 1) the word SUMMARY, 2) the report title, 3) an indication that the purpose of the report is to fulfill the Master’s Project requirement for the MSCE or MSEE degree (state which), 4) the name of the author of the Summary, 5) the date of the Summary, 6) the body of the Summary, and 7) the signature of the adviser. If the task is the analysis of a journal paper, then the paper should be adequately referenced in the Summary, but not included with the Summary.

**Submission Deadline**

To fulfill the requirements for the degree, **students must submit their signed Master’s Project to the Graduate Records Office by the graduation date.**

A copy of the Title and Summary pages are filed in the student’s file for certification purposes. The Graduate School is notified that the student has fulfilled the Master’s Project requirement when the student is certified.

Reports are kept in 4-206A CST and routinely discarded after one year. The Reports are available to anyone to peruse, but are not to be removed from 4-206A CST. Readers wanting copies should get in touch with the authors.
MASTER’S PROJECT REPORT

Report Title

Submitted to Fulfill the Master’s Project Requirement for the MSCE/MSEE Degree

by

Student’s Name

SUID

Date

Master’s Project Advisor: ______________________________ Date: ______________

Dr. (Name)

Program Director/Chair: ______________________________ Date: ______________

Dr. (Name)
MASTER’S PROJECT SUMMARY

Report Title

Submitted to Fulfill the Master’s Project Requirement for the MSCE/MSEE Degree

by
Student’s Name

Body of the Summary:

Master’s Project Advisor: ______________________________ Date: ______________
Dr. (Name)