

The form is to be completed by the graduating student and then retained in the department.

**Student Information**

Student's Name	Last	First
Advisor's Name		
Graduation	Term	Year
Semester & Year of Entry to PhD Program	Term	Year
Semester & Year of PhD Final Defense	Term	Year
Did you ever take an official Leave of Absence during your studies?	Yes	No
Are you identified as physically disabled?	Yes	No
Student's Gender	Male	Female
Country of Citizenship		
Ethnic Background	American Indian & Alaskan Native Asian Black or African American Hispanic Native or Pacific Islander White Other _____	
Email address for contact after leaving UIC (do not write UIC email address)		

**Job placement upon completion of the MS degree**

Company Name		
Job Title		
Location	City	State
Country (if outside US)		