**COMPUTER SCIENCE MASTERS' PRESENTATION INFORMATION**
(Submit to CS examination committee chairperson)

Name: _____ _____
Last First

Address: _____ _____
City, State, & Zip

Telephone: _____ _____
Day MS Program (CS or CYSC)

Student Email: _____ Banner ID/UTSA ID: _____

Comprehensive Exam

Thesis Option ☐ Non-Thesis Option I ☐ Non-Thesis Option II ☐

EXAMINATION COMMITTEE:

_____ Chairperson/Advisor

_____

_____

_____

PRESENTATION DATE: _____

PRESENTATION TIME: _____

TITLE: _____

TOPIC: _____

PRESENTATION PLATFORM: _____

**(If you schedule your presentation online, please send Karina Rojas, karina.rojas@utsa.edu, the link invite to your presentation so that she may add the link to your presentation announcement)**

LIST OF PAPERS: _____

_____

_____

_____

_____

_____

Revised 03/20/2023