## COMPUTER SCIENCE MASTERS' PRESENTATION INFORMATION

(Submit to CS examination committee chairperson)

Name: _			
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Address: _			
		City, State, & Zip	
Telephone:	Day	MS Program (CS or CYSC)	
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Student Email:		Banner ID/UTSA ID:	
		Comprehensive Exam	
	Thesis Option	Non-Thesis Option I Non-Thesis Option	
EVAMIN	ATION COMMITTEE		
EXAMIN	ATION COMMITTEE:		Chairperson/Advisor
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PRESE	ENTATION DATE:		
			_
PRESI	ENTATION TIME:		
	TITLE:		
	TOPIC:		
PRESENTAT	TION PLATFORM:		
		ne, please send Karina Rojas, karina.rojas( the link to your presentation announcemen	
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