University of Nebraska-Lincoln
Department of Electrical Engineering

Graduate Student Exit Survey

(revised Nov 2000)

Graduate Degree Program: MS (option I, II, or III) PhD

Date of Survey: _____

Graduate Student Name: _____

Advisor Name: _____

Program Information:

Length for Completion of Program: _____

Financial Support (circle as needed): Full-Time Part-Time
RA duration: _____
TA duration: _____
Fellowship duration: _____
other

Number of Journal Publications: _____
Number of Conference Presentations: _____
Awards (specify): _____
_____

Job Placement Information:

Position After Graduation: _____
_____

Starting Salary (confidential): $_____

Address: _____
_____
_____
_____

Email After Graduation: _____

Total Number of Offers: _____

Submit to EE Graduate Secretary after final oral examination.