

Student Name: \_\_\_\_\_  
ID# \_\_\_\_\_



## (1) THEORY OF COMPUTATION

### Proficiency Requirement

#### Option I

The Theory of Computation proficiency requirement can be satisfied by taking:

*CSE 303, Intro to the Theory of Computation*

or

*CSE 540, Theory of Computation.*

If either of these courses were taken at Stony Brook and appear on your transcript with a passing grade, circle them here and indicate the semester.

#### Option II

Certain undergraduate (300 level) courses that are prerequisites to graduate courses can, with the **permission of the course instructor**, be taken for graduate credit using the course designation of CSE 587.

If you are selecting this option, please fill in the information immediately below, obtain the signature of the course instructor, and turn in this signed form to the CS Graduate Office.

I have registered for CSE 587, **section#** \_\_\_\_\_, in the (check one) • **fall** • **spring** • semester of \_\_\_\_\_ (year), to fulfill the Theory of Computation proficiency requirement. A final passing grade in this course will satisfy this requirement.

Approval Signature of Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Instructor: \_\_\_\_\_

#### Option III

A proficiency requirement may also be met by showing evidence of a similar course taken elsewhere, if approved by an instructor of the course here at Stony Brook. If you are selecting this option, you should meet with the appropriate faculty member, providing copies of transcripts and syllabi. The faculty member should fill in the information below, and sign the form. You should then turn in this signed form to the CS Graduate Office.

*The following information provided by the student is considered sufficient evidence that this student has satisfied the Theory of Computation Proficiency requirement at the level of CSE 303, with a grade of C (i.e., 2.0/4.0) or higher:*

\_\_\_\_ Took a similar course at \_\_\_\_\_ in semester \_\_\_\_\_ and received a passing grade

\_\_\_\_ Other:

Approval Signature of Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Instructor: \_\_\_\_\_

***Make a copy for your records***

