Binghamton University
Thomas J. Watson School of Engineering and Applied Science
Electronics Packaging Concentration

Concentration Completion Check

Name:_____ B #:_____

Department:_____

All three components must be completed for Electronics Packaging Concentration.

I. Packaging Enrichment:					
Packaging Seminar Course WTSN 581:					
Course Name & Number	**Semester**	**Year**	**Grade**	**Professor**	**Comments**
Symposium/Conference Attendance (*Choose one of the following*):					
	Date of attendance			**Signature of advisor**	
Technical Conferences					
II. Packaging Coursework:					
Course Name & Number	**Semester**	**Year**	**Grade**	**Professor**	**Comments**
WTSN 582 - Fundamentals of Packaging:					
Graduate Level Packaging Course (e.g. SSIE 578):					
Graduate Level Packaging Course:					
III. Research (Packaging Related Thesis, Project, or Dissertation):					
Please check one:	**Thesis**	**Project**	**Dissertation**		
Title:					
Brief Description:					

Electronics Packaging Concentration Approval _____ _____
Advisor Date

Concentration Completion Approval _____ _____
Electronics Packaging Committee Date