

Accelerated Bachelor's and Master's Degree Program

Application

ID Number: _____

Last Name: _____ First name: _____

Address: _____

Phone number: (Home) _____ (Work) _____

E-Mail: _____

Current semester: ___ Fall ___ Spring 20__.

Total credits completed at another institution _____.

Total credits completed at Queens College, not including current semester _____.

Credits attempted in current semester _____.

Overall Queens College GPA _____

Three letters of recommendation are to be submitted **with this application** in sealed envelopes. They must be from full-time faculty with whom you have taken a course that is required for the major. Please indicate the name, department and course of the faculty who will be writing your letters.

	Name	Department	Course
(1)			
(2)			
(3)			

Please use the recommendation forms that are included with this application.

Submit this application and your three letters of recommendation to:

**Computer Science Department
Accelerated BA/MA Program
Queens College, CUNY
Flushing, NY 11367**

Accelerated BA/MA Program

Queens College
Department of Computer Science

Letter of Recommendation

To the student: *Please complete the following.*

Student's Name _____ ID Number _____

Name of faculty reference: _____

Course(s) taken with this faculty member: _____

To the recommender:

In the space provided, or on the reverse as necessary, please provide a frank evaluation of the student's potential for success in the graduate program in computer science. Specific examples of the student's strengths and weaknesses in your course would be more help than routine praise.

	Excellent	Good	Fair	Poor	Cannot judge
Analytical skills					
Motivation for study					
Flexibility in problem solving					
Potential for independent research					
Written expression					
Oral Expression					
Potential as a teaching assistant					
Potential as a research assistant					

Signature: _____ Date _____

Title: _____ Department: _____

Accelerated BA/MA Program

Queens College
Department of Computer Science

Letter of Recommendation

To the student: *Please complete the following.*

Student's Name _____ ID Number _____

Name of faculty reference: _____

Course(s) taken with this faculty member: _____

To the recommender:

In the space provided, or on the reverse as necessary, please provide a frank evaluation of the student's potential for success in the graduate program in computer science. Specific examples of the student's strengths and weaknesses in your course would be more help than routine praise.

	Excellent	Good	Fair	Poor	Cannot judge
Analytical skills					
Motivation for study					
Flexibility in problem solving					
Potential for independent research					
Written expression					
Oral Expression					
Potential as a teaching assistant					
Potential as a research assistant					

Signature: _____ Date _____

Title: _____ Department: _____

Accelerated BA/MA Program

Queens College
Department of Computer Science

Letter of Recommendation

To the student: *Please complete the following.*

Student's Name _____ ID Number _____

Name of faculty reference: _____

Course(s) taken with this faculty member: _____

To the recommender:

In the space provided, or on the reverse as necessary, please provide a frank evaluation of the student's potential for success in the graduate program in computer science. Specific examples of the student's strengths and weaknesses in your course would be more help than routine praise.

	Excellent	Good	Fair	Poor	Cannot judge
Analytical skills					
Motivation for study					
Flexibility in problem solving					
Potential for independent research					
Written expression					
Oral Expression					
Potential as a teaching assistant					
Potential as a research assistant					

Signature: _____ Date _____

Title: _____ Department: _____