

Application for the Fifth-Year Master of Science in Machine Learning

School of Computer Science Carnegie Mellon University

Personal Data			
Mr. Ms. Mx. Family Name		ly Name	Given Name and Middle Name (if any)
Andrew ID		Are you a U.S. citizen or p	permanent resident of the U.S.? Yes No No
Date of Birth	Country o	f Citizenship	Visa Type (if not U.S. citizen or permanent resident)
Anticipated Gradu	ation Semester	Desired Program	Entry Semester
Contact Data			
Current Address			Permanent Address (if same as current, leave blank)
Telephone			
_			
Home Department			Advisor
Courses that y	ou have/will h	ave taken as an und	dergraduate for the Fifth-Year Master's Program:
Course Number	Semester	Grade (if any)	Course Number Semester Grade (if any)
Course Number	Semester	Grade (if any)	If using $10-315+15-281$, enter $15-281$ information here
Letter of recor	nmendation w	vriters:	
Name			Title and Affiliation
Name			Title and Affiliation
Email your for	rm, statement	of purpose, resume	, and transcript to Dorothy Holland-Minkley (dfh@cs.cmu.edu).
Signature			Date

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