



EECS DEPARTMENTAL PETITION

Additional Employment

Student Name: _____ | Grad Program Start Date: _____

ID Number: _____ | MIT Office Address: _____

Degree Program: _____ | Email Address: _____

Term / Year: _____ | Company and Location: _____

MIT Funding Source for Term (Type, Hours per Week, Sponsor): _____

Specify work to be completed for MIT funding source:

Specify work to be completed in additional employment:

Proposed HOURS per Week: _____ (No More than 8 Hours Allowed per Week)

Student Signature: _____ | Date: _____

Thesis Supervisor Signature: _____ | Date: _____

This signed petition should be turned in to the EECS Graduate Office, 38-444, where it will be reviewed by the Graduate Officer, and/or the Committee for Graduate Students, and the Department Head. The petitioner will be notified of the results by email as soon as they are available.

For Departmental Use Only:

Decision: APPROVED | NOT APPROVED

Graduate Counselor Signature: _____ Date: _____

Graduate Officer Signature: _____ Date: _____

Department Head Signature: _____ Date: _____