

UIC

College of Engineering REQUEST FOR A MINOR / CONCENTRATION

<u>PLEASE PRINT</u>
NAME _____
STREET ADDRESS _____
CITY / STATE / ZIP _____

UIN NUMBER

EMAIL ADDRESS

_____	_____
CURRENT COLLEGE	CURRENT MAJOR
STUDENT SIGNATURE _____ DATE _____	

MINORS IN THE COLLEGE OF ENGINEERING

<input type="radio"/> Bioengineering	<input type="radio"/> Chemical Engineering	<input type="radio"/> Civil Engineering	<input type="radio"/> Computer Engineering
<input type="radio"/> Computer Science	<input type="radio"/> Electrical Engineering	<input type="radio"/> Environmental Engineering	<input type="radio"/> Industrial Engineering
<input type="radio"/> International Studies	<input type="radio"/> Materials Engineering	<input type="radio"/> Mechanical Engineering	<input type="radio"/> _____

CONCENTRATIONS ASSOCIATED WITH CURRENT MAJOR

<input type="radio"/> Chemical Engineering – Biochemical Concentration	<input type="radio"/> Computer Science – Computer Systems Option
<input type="radio"/> _____	<input type="radio"/> _____

MINORS OUTSIDE THE COLLEGE OF ENGINEERING

<input type="radio"/> _____	<input type="radio"/> _____
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Outside Engineering Minor approval _____ Date _____

-----THE FOLLOWING SECTION IS FOR USE BY THE COLLEGE OF ENGINEERING-----

<input type="radio"/> Approved <input type="radio"/> Not Approved <input type="radio"/> Minor Closed
Comments _____

Signed (for College of Engineering) _____ Date _____

College of Engineering

Certification of Fulfillment of Minor Requirements

The student named below has indicated that he/she intends to graduate with a minor in your department. Attached is a copy of the student's DARS report to better assist you in this evaluation. Please provide the information requested and return to the College of Engineering (M/C 159), Science and Engineering Offices Room 123 by _____.

Name _____

UIN _____

Minor _____

UIC Courses

Minor Courses	Hours	Grades	In Progress

Transfer Courses

Minor Courses	Hours	Grades	In Progress

PLEASE check one of the following: Minor Approved Minor Denied

Additional comments:

Signature of Department Representative Title Date