

Human-Computer Interaction & User Experience Minor

Department of Business and Information Technology

Missouri University of Science and Technology

PLEASE RETURN COMPLETED FORM TO MINOR DEPT.

Name: _____ Student ID: _____

Local Address: _____

Primary Dept.: _____

Primary Advisor: _____

Expected graduation date: _____ Today's date: _____

Courses selected for minor program (minor advisor must initial any courses requiring special permission and any substitutions for courses planned):

Course Title	Number	Credit hrs.	Semester taken / Grade received
Web and Digital Media Development	IST 4654 (286)	3	/
Intro to Web and New Media Studies	IST 4680 (380)	3	/
Human-Computer Interaction	IST 5885 (385)	3	/
Prototyping Human-Computer Interactions	IST 5886 (386)	3	/
Human-Computer Interaction Evaluation	IST 5887 (387)	3	/

Signature (Student) _____ Date: _____

Signature (Minor Advisor) _____ Date: _____

Signature (Dept. Chair) _____ Date: _____

cc: ORIGINAL TO REGISTRAR'S OFFICE
Student
Major Advisor
Minor Advisor

Last updated: 2/10/15