

Information Science & Technology 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: _____

Courses selected for minor program (see undergraduate catalog for IST and ERP electives).

Course Title & Number	Number	Credit	Semester Taken/Grade
Intro to MIS	IST 1750 (50)	3	/
Implementing IS I: User Perspective	IST 1551 (51)	3	/
Implementing IS II: Data Perspective	IST 1552 (151)	3	/
Intro to ERP	ERP 2110 (246)	3	/
An additional IST or ERP course at the 2000 level or above		3	/

Signature (Student) _____ Date: _____

Signature (Minor Advisor) _____ Date: _____

Signature (Dept. Chair) _____ Date: _____

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

Last update: 9/5/14