## MINOR Application (BME minor) (use this form ONLY for BME minor)

Student's Name:				MIT ID:					
		(first)	(M.I.)			_			
Field of Minor: BioMedical Engineering (BME				MIT Course (major):					
Expected Date for Award of S.B. (circle): Feb			Feb.	June	Sept.	Year:			
Phone:		Email	l:						
Faculty Advisor (major):				Room:		_ Phone:_			
at least 1 year junior year). program of s major and m either Prof. I	Fill out this form by a before your plann Meet with your dep tudy should satisfy inor. Submit the cortan or Prof. van Vliffice (16-267).	ed graduation vartment's BMI all the rules, es mpleted applica	with an S E advisor specially ation for	SB degre r in orde the rules m, signe	e (This in to plants related d by you	is typically your progi to allowed ir departme	spring term cam of study overlap bet ent's BME a	of the y. Your ween dvisor, to	
MAJOR (sp	ecify):			<b>BME</b>	MINOF	<u>R</u>			
	cts to fulfill degree Subject Number		7/N)	Catego		Subject Number	complete (Y/N)	overlap (Y/N)	
	7			progran					
				math					
				math					
				physiolog BME 1	ogy				
				BME 2	,				
				BME 3					
				Signat	ure (Dat	e):			
Departmenta	l BME Advisor:		_						
Signature (D	ate):								