

STUDENT INFORMATION FORM

MULTIMEDIA MINOR

Department of Instructional Technology
Utah State University

Name _____ A # _____ Date _____

Anticipated Graduation Date _____

Major _____ Other Minors _____

Major Advisor _____ Department _____

Current Class Standing ____ Freshman ____ Sophomore ____ Junior ____ Senior

Where did you hear about our Minor?

Planned Program of Study

<i>Course #</i>	<i>Course Title</i>	<i>Credit Hours</i>	<i>Semester Scheduled</i>

Minimum Credit Hours Required 15

Student Signature _____ Date _____

Program Coordinator Approval _____ Date _____

Return to:

Department of Instructional Technology & Learning Sciences
2830 Old Main Hill
Education Building Room 215
Logan, UT 84322-2830