ROSE-HULMAN INSTITUTE OF TECHNOLOGY MULTIDISCIPLINARY MINOR IN ROBOTICS COURSE SUBSTITUTION APPROVAL FORM

Student's Name:	Date:	
ID#:	Current Year: Fr So Jr Sr (Gr
Advisor:	Campus Box #:	Major:
You are seeking to s Please list both cour		quired for the multidisciplinary minor in robotics.
Required Course Number and Title:		Credit Hours:
Substituted Course Number and Title:		Credit Hours:
Institution offering t	the substituted course (if not RHIT):	
Brief justification for	r taking the substituted course: (Ob	taining an easy A is not a justification.)
description of the co this form along with then obtain the sign Robotics advisor, you signature at the bot	ourse you plan to take and the course your written justification for taking natures of your advisor and the approper request may be submitted to the tom and submit the form to the Regustitution only affects your pursuits	prior to taking the substituted class. The catalog e you are substituting it for should be attached to the class. Please fill out the top of the form, and opriate Robotics advisor(s). If directed by a Curriculum Committee for approval. Add your istrar. You will be notified of the Committee's t of the robotics certificate; you still need to meet
Academic Advisor sign	ature	
Robotics Advisor signa	ture from the department (ME, ECE, or C	SSSE) offering the required class:
Approved	Refer to Curriculum Committee	
Robotics Advisor from	the department offering the substituted	course (if different)
Approved	Refer to Curriculum Committee	
Robotics Advisor signa	ture from the department of the track yo	ou are pursuing (if different):
Approved	Refer to Curriculum Committee	
Comments by any adv	isor:	
Student signature		