

University of Notre Dame Bioengineering Course Plan (Revised 5.22.24)

This form should be completed prior to the Qualifying Exam. The courses listed here are the minimum requirements for the degree. Submit the completed form to the Program Managing Director.

Proposed Program of Study for: _____ **NDID:** _____

Admission (Semester/Year): _____ **QE:** _____ **CE:** _____

Primary Engineering Courses (AT LEAST 6 courses/18 credits):

Course Number	Title	Semester/Year	Grade

Other Courses

Course Number	Title	Semester/Year	Grade

Additional Coursework Recommended by Your Committee

Course Number	Title	Semester/Year	Grade

Student Signature: _____ **Date:** _____

Committee Members:

Name: _____ **Signature:** _____ **Date:** _____

Name: _____ **Signature:** _____ **Date:** _____

Name: _____ **Signature:** _____ **Date:** _____

Program Director:

Name: _____ **Signature:** _____ **Date:** _____