MARQUETTE UNIVERSITY
College of Health Sciences
Biomedical Sciences

Neuroscience Minor
Research Course Approval Form

Student Instructions

1. Complete the form using a computer—handwritten forms will not be accepted.
2. Save a copy.
3. Email completed form to marieke.gilmartin@marquette.edu
4. Monitor your MU email for decision and save documentation for your records.

Student Information

Name: _____ MUID: _____
Last First MI

Major/Minors: _____ Expected Graduation: _____

Research Course Approval Request Information

Note that no more than 6 credits of research courses can count towards the neuroscience minor.

Course: _____ Title: _____
Section#: _____ Instructor: _____
Credits: _____ Term/Year: _____

Research course credits (eg. 4956 or 4995) already applied to the minor, if any: _____
Course Semester taken credits

Why should this research course apply towards your NRSC minor:

Approved: Y____ N____ _____ _____
Director of Minor Signature Date