



## MAJOR REQUIREMENTS APPROVAL FORM

Please return this completed form to either the Media Arts and Design office (Classics 304) or the Director of Undergraduate Studies.

This program, if signed by the student and Director of Undergraduate Studies and successfully completed by the student, will satisfy the requirements of the Media Arts and Design major. Any changes to this program must be approved by the Director of Undergraduate Studies and submitted.

Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

College Adviser: \_\_\_\_\_ Anticipated Graduation: \_\_\_\_\_

UChicago Email Address: \_\_\_\_\_

Cluster: \_\_\_\_\_

### *Media Theory Course #1*

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

### *Media Theory Course #2*

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

### *Media History Course #1*

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

### *Media History Course #2*

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

### *Media Practice and Design Course #1*

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_



***Media Practice and Design Course #2***

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***Capstone Colloquium 1***

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***Capstone Colloquium: Exhibition and Curation***

Course Number and Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

Electives courses must originate in or be cross-listed with Media Arts and Design. Course selections should be discussed with the Director of Undergraduate Studies.

***MAAD Course #1:*** \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***MAAD Course #2:*** \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***MAAD Course #3:*** \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***MAAD Course #4:*** \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

***MAAD Course #5:*** \_\_\_\_\_

Instructor: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

By signing this form, I agree that I will take these courses in order to graduate with a major in Media Arts and Design. Before changing courses, I agree to consult with the Director of Undergraduate Studies to confirm that the new classes are acceptable substitutes to the ones listed here. If I do not get prior approval from the Director of Undergraduate Studies, I understand that I may be ineligible to graduate on time.



THE UNIVERSITY OF  
**CHICAGO**

**Media Arts and Design**

Classics 304  
1010 E. 59<sup>th</sup> Street  
Chicago, IL 60637  
773.834.1077

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

DUGS signature: \_\_\_\_\_ Date: \_\_\_\_\_