

Election of Minor
Industrial Organization (22-24 hours)
2020-2021 Catalog

Name _____ I.D. Number _____

Planned Degree Completion Date: Mo. _____ Yr. _____

Major: _____

Required Courses

Do not write in shaded area

		Hours
<input type="checkbox"/>	PSYC 110 Introduction to Psychology	4.0
<input type="checkbox"/>	PSYC 201 Social Psychology	3.0
<input type="checkbox"/>	PSYC 227 Organization Psychology	4.0
<input type="checkbox"/>	PSYC 241 Statistics and Research Design I	
<input type="checkbox"/>	OR	4.0
<input type="checkbox"/>	MATH 210 Statistical Analysis	
<input type="checkbox"/>	PSYC 345 Psychological Tests and Measurements	4.0
<input type="checkbox"/>	PSYC 376 Personnel Psychology	4.0
<input type="checkbox"/>	OR	
<input type="checkbox"/>	BUS 340 Human Resource Management (pre-req. BUS 111)	3.0

Explain transfer, substitutions, or other irregularities:

Advisor Signature _____ Date _____

Department Chair Signature _____ Date _____

I understand I have final responsibility for monitoring my graduation requirements.

Student Signature _____ Date _____

Return this form to the Office of the Registrar