Biomedical Engineering Program Sign Up Sheet

Colorado State University
Knowledge to Go Places

Date _____/_____/_____

Demographic Information

Full Name _____

CSUID_____-_____-_____ Email Address _____

Local Phone # (_____)_____

Local Address _____

   City_____, State _____ Zip _____

Permanent Address _____

   City_____, State _____ Zip _____

☐ Female   ☐ Male

<u>Ethnicity</u> – Please mark all that apply:
(disclosure is *voluntary* and will not be used in a discriminatory manner.)

☐ American Indian or Alaskan Native

☐ Anglo, Caucasian, White, not of Hispanic Origin

☐ Asian, Japanese, Chinese, Vietnamese, Korean, Filipino

☐ Black, African American, not of Hispanic Origin

☐ Hispanic, Chicano, Cuban, Puerto Rican, Latino, Mexican American

☐ Native Hawaiian or other Pacific Islander

☐ I do not wish to provide this information

<u>Residency Status</u>

☐ Resident   ☐ Non- Resident

☐ Non-Resident (WUE)   ☐ Non-Resident (WICHE)   ☐ Resident - Employee

Academic Information

☐ Engineering Major   ☐ Non-Engineering Major

Major _____

☐ Undergraduate Student   ☐ Graduate Student

Adviser For Your Major _____

First Semester planning to enroll in BEP classes   Fall_____ Spring _____ Summer _____

Year   Year   Year

Intended Graduation Date   Fall _____ Spring _____ Summer _____

Year   Year   Year

Area of Biomedical Engineering Interest

☐ Biomechanics and Biomaterials

☐ Molecular, Cellular, and Tissue Engineering

☐ Medical Diagnostics, Devices, and Imaging

☐ Undecided

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For Office Use Only

☐ Database   ☐ Email List   ☐ CIS (undergraduate only) ☐ BMES Information

ISIS Screens: Ad aplnsumm