

The Concentration in Applied Mathematics requires 12 or more credits in a coherent set of courses outside the Mathematics Department approved by the Associate Chair. **We recommend that you have the courses you plan to take in the related area approved before you take the courses.** Get a form for requesting approval of courses for your related area from the Mathematics Department office (Weber 101).

There are many coherent sets of courses suitable for the Concentration in Applied Mathematics. Here are some popular combinations that are sure to be approved.

1. Any combination of PH / PHCC courses numbered greater than PHCC142.
2. Any combination of CS/CSCC courses and/or ST/STCC courses, **in addition** to credits used in column 2 under the Computer Science, Statistics or Mathematical Sciences Electives.
3. Any combination of AE, AT, CH, EE, EG, ES courses and/or CE courses numbered CE260 or greater.
4. Any combination of BA, BD and BQ courses numbered 200 or greater.
5. Any combination of EA and/or EC courses (in addition to credits used in column 1 under Behavioral and Social Sciences).
6. Any combination of C/C CC courses numbered greater than C CC107.

We urge you to select courses that reflect your interests and goals to satisfy the related area requirements in your program of study. The sets of courses listed are not the only possibilities.

Professor James Thomas, Associate Chair
Department of Mathematics

FALL 03

COLORADO STATE UNIVERSITY
MATHEMATICS MAJOR
CONCENTRATION OF APPLIED MATHEMATICS

Request for Approval of Related Area in Applied Mathematics

Name: _____ Adviser: _____ Date of Graduation: _____

Local Address: _____ City: _____ Zip: _____ Phone: _____

RELATED AREA (12 credits): A Coherent set of courses outside the Mathematics Department in which mathematics is applied; to be approved by the Associate Chair.

TERM/YEAR	COURSE	CREDITS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional information which may be helpful in approving the above courses:

Student Signature: _____ Date: _____

Adviser Signature: _____ Date: _____

Approved: _____ Disapproved: _____ Additional Information Requested: _____

Associate Chair Signature: _____ Date: _____
