

**CERTIFICATE in ENGINEERING DESIGN
Registration and Completion Form**

Name (Last, First)	PSU ID	Major
Local Address	E-mail	Phone
Planned Date of Graduation	Planned Date of Registration	Semester Standing at Registration

---PLAN FOR MEETING CERTIFICATE REQUIREMENTS---

Plan Approved By: _____ **Date:** _____

Charles Cox, Engineering Design Program, 124 Hammond Building, University Park, PA 16802
Phone: 814-867-4864, Secr. 814-865-2952, Fax: 814-863-7229

PROGRAM REQUIREMENTS	CREDITS	REQUIREMENTS	DATE COMPLETED
Prescribed Courses	3	1. _____	_____
Additional Credits: Courses	Up to 9	1. _____	_____
		2. _____	_____
		3. _____	_____
Additional Credits: Projects	Up to 9 credits of 494 or 496 in EDSGN or other engineering major for supervised participation in a design project. Note C for co-op for up to 3 credits.	_____	_____
		Design Project 1	
		_____	_____
		Supervisor 1	
		_____	_____
		Design Project 2	
		_____	_____
		Supervisor 2	
		_____	_____
		Design Project 3	
		_____	_____
		Supervisor 3	
		_____	_____
		Design Project 4	
		_____	_____
		Supervisor 4	
Total Credits	At least 12		_____
Portfolios Completed	1	e-portfolio _____ Brochure format _____	_____
REQUIREMENTS COMPLETED	13	_____	_____
		Approved	Date

Comments: