## **HUA Inquiry Seminar/Practicum Registration Form**

Student Name_						
WPI Student ID #			Email address			
HU 39 Sect	tion CRN	Course	Title			
Instructor						
	er your request to join my Inquiry ly taken or plan to take:	Seminar	or Practicum, p	lease list the	e 5 HUA courses	
Course #	Course name (approximately)		Term/Year	Grade	Units (5 1/3 units)	
				<del></del>	_	
Check all that a	apply:  one of these courses is outside the	group I h	ave chosen for (	depth.		
	<b>aree</b> of these courses are in the ar	-		-	ır or Practicum.	
At least <i>or</i> 2000 level or hi	<b>ne</b> of the courses in the area or disigher.	scipline of	my Inquiry Ser	ninar or Pra	cticum is at the	
	completed an Inquiry Seminar or taken only once).	Practicur	n. (Inquiry Sem	inars and Pr	racticums are	
	than one AP credit is used toward quiry Seminar or Practicum to see					
Student Signatu	ıre					
Instructor Signa	ature					
signature:	practicum registration form caus		. 0		mic advisor's	
Dloggo note: If	by the time this Seminar or Practi	igum hogi	ne vou have not	t completed	all 5 HIIA	

**Please note:** If by the time this Seminar or Practicum begins you have not completed all 5 HUA courses, including at least one in an area of "breadth" and at least three in an area of "depth," including one at the 2000 level or above, you will not earn Inquiry Seminar or Practicum credit for this course.