Bioengineering Minor Checklist

Name ___________________________ Student ID ___________________________

Required:
☐ CBE 30386 Introduction to Bioengineer

Required 1 course from this group:
☐ BIOS 30341 Cellular Biology
☐ BIOS 40412 Systems Biology

An elective sequence of 3 engineering courses taken from one of the following concentration areas:

Biomaterials
☐ CBE 40456: Polymer Engineering
☐ CBE 40483: Biomolecular Engineering
☐ AME 50548: Next Generation Nanoscale Manufacturing of Biomedical Systems
☐ AME 50571: Biomaterials
☐ AME 60677: Biomimetic Tissue Engineering
☐ AME 60679: Nanoparticles in Biomedicine

Biomechanics
☐ AME 50571: Biomaterials
☐ AME 60671: Orthopaedic Biomechanics
☐ AME 60672: Cell Mechanics
☐ AME 60673: Human Body Kinematics

Biotransport/Microdevices
☐ AME 50548: Next Generation Nanoscale Manufacturing of Biomedical Systems
☐ AME 60675: Biofluid Mechanics
☐ AME 60677: Biomimetic Tissue Engineering
☐ EE 40432: Intro to Systems Biology
☐ EE 47040: Biomedical Device Engineering
☐ CBE 30357: Biotransport
☐ CBE 40485: Biological Thermodynamics
☐ CBE 60589: Engineering Applications of Medical Physiology
☐ CBE 60655: Water, Disease & Global Health

Tissue Engineering and Biomaterials
☐ CBE 40325: Immunoengineering
☐ CBE 40479: Tissue Engineering
☐ CBE 40483: Topics in Biomolecular Engineering
☐ CBE 41910: Biomolecular Engineering Lab
☐ AME 50548: Next Generation Nanoscale Manufacturing of Biomedical Systems
☐ AME 50571: Biomaterials
☐ AME 60672: Cell Mechanics
☐ AME 60677: Tissue Engineering

Molecular and Cellular Bioengineering
☐ CBE 40325: Immunoengineering
☐ CBE 40483: Biomolecular Engineering
☐ CBE 40487: Drug development and methods of action
☐ CBE 41910: Biomolecular Engineering Lab
☐ CBE 60589: Engineering Applications of Medical Physiology
☐ CE 60355: Water, Disease & Global Health
☐ AME 60672: Cell Mechanics
☐ EE 40432: Intro to Systems Biology
☐ PHYS 40432: Biological Physics

Self directed concentration
☐ ________________________________
☐ ________________________________
☐ ________________________________

Approved by: ______________________ Date: __________________________

Please return the completed, signed form to Donna Fecher, 365 Fitzpatrick Hall

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