



Department of Computing Security

Computing Security (Infosec-BS)

Varied Cluster Approval Form

Name: _____ UID # _____

Date: _____ Email: _____

List the 3 main cluster proposed courses:

COURSE NUMBER	COURSE NAME

List the 3 additional advanced proposed courses:

COURSE NUMBER	COURSE NAME

Why have you chosen these courses?

How will these contribute to your overall education and future career goals?

Undergraduate Program Director Signature

Academic Advisor Signature

Attach additional sheet if needed.