

**MATHEMATICS MAJOR
CONCENTRATION/SPECIALIZATION APPLICATION FORM**

Date _____

Last Name _____ First Name _____ MI _____

Student ID# _____ UCI Email Address _____

Overall UCI GPA _____ Math Major GPA _____

_____ Number of Quarter Units Completed _____

Class Level (Check One) Freshman Sophomore Junior Senior

Expected Graduation Date (Quarter/Year) _____ **Check One**

Concentration/Specialization:

Concentration in Data Science

Advisor: Professor Bob Pelayo - RH 525, rcpelayo@uci.edu

Concentration in Mathematics for Education/Secondary Teaching Certification

Advisor: Professor Bob Pelayo - RH 525, rcpelayo@uci.edu

Specialization in Applied Computational Mathematics

Advisor: Professor Patrick Guidotti -RH 410F,
gpatrick@math.uci.edu

Specialization in Mathematical Biology

Advisor: Professor Jun Allard - RH 440F, jun.allard@uci.edu

Specialization in Mathematics for Education

Advisor: Professor Bob Pelayo - RH 525, rcpelayo@uci.edu

Instructions:

Fill out both sides of the application form. Arrange for an interview with the respective concentration/specialization advisor, obtain advisor's signature, and return the completed application to the Physical Sciences Student Affairs Office (Rowland Hall 134).

INTERVIEW

Name _____

In the left column, list all the courses you have taken thus far towards fulfilling the concentration/specialization requirements and the grades you received in those classes (classes towards GE/Writing requirements need not be listed). On the right, list all the classes that you need to take to fulfill the remaining requirements. If your concentration/specialization requires approval of additional courses, come prepared to discuss options with the advisor.

Courses Completed	Courses Planned

Advisor Comments (For Applied Math, list approved extra courses here):

Advisor Signature

Date

Student Signature

Date