PROPOSAL FOR A DOCTORAL MINOR PROGRAM  
DEPARTMENT OF AERONAUTICS AND ASTRONAUTICS  
MASSACHUSETTS INSTITUTE TECHNOLOGY

Doctoral Candidate __________________________ MIT ID ___________ Email ___________________  

Major Area/Thesis Field_________________________Proposed Minor Field_________________________  

The Minor Program must consist of a coherent set of related graduate subjects adding up to at least 30 units (typically three courses) in a field of study related to Aeronautics and Astronautics, which is not in the candidate’s primary field of study. The aim of the Minor requirement is to broaden the candidate’s knowledge and perspective of fields that support the candidate’s capabilities as an aerospace engineer. In consultation with his/her Thesis Committee and a Minor Field Advisor, the student proposes a minor field and set of subjects. Please list the three subjects that will constitute the Minor Area, including the subject name and the grade if the subject has been completed. Subjects graded Pass/Fail are not acceptable for the minor.

1. Subject # ______Subject Name ___________________________________________ Units___

2. Subject # ______Subject Name ___________________________________________ Units___

3. Subject # ______Subject Name ___________________________________________ Units___

Briefly describe the proposed minor including rationale for fulfilling the requirements that (1) the minor is in a field of study related to Aeronautics and Astronautics, and (2) the minor is in a field outside of the candidate’s primary field of study.

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***Please return this form to the AeroAstro Academic Programs Office, Room 33-202.***
This form must be signed by the Minor Advisor signifying that the subjects proposed by the student form a coherent set in the Minor Field.

Minor Advisor (Print) ________________________________________________________________

Signature ______________________________________________________________________

Major Area Courses (5 total, graduate level)

1. Subject # ______ Subject Name _________________________________________ Units___

2. Subject # ______ Subject Name _________________________________________ Units___

3. Subject # ______ Subject Name _________________________________________ Units___

4. Subject # ______ Subject Name _________________________________________ Units___

5. Subject # ______ Subject Name _________________________________________ Units___
The form must also be signed by the Thesis Committee Chair signifying that, in the opinion of the student’s Thesis Committee, the Minor Field is related to aerospace engineering and is outside of the student’s Major Field.

Thesis Committee Chair (Print) ____________________________________________
Signature __________________________________________________________________________

Candidate’s Signature ____________________ Date Signed _____________________________

Additional Comments _____________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

Department’s Graduate Committee Chair Signature: _______________________________________
Date Signed __________________________ Proposal was: APPROVED or DENIED

***Please return this form to the Aero/Astro Academic Programs Office, Room 33-202.***

05/15