

# CIDE COLLABORATIVE SPECIALIZATION STUDENT RECORD

## Personal Data

**Title:** Mr., Mrs., Ms. Dr. Gender \_\_\_\_\_ Student No.

**Family Name:**

**First Name and Initial:**

**Permanent Mailing Address:** \_\_\_\_\_

**City & Postal Code:** \_\_\_\_\_ **Telephone Number:**

**Permanent Email Address:** \_\_\_\_\_ **Country:**

## Registration Data

## CIDEC Specialization Requirements

1. Courses: a) Mandatory CIE 1001<sup>1</sup>, b) 1 additional core course C) 2 additional core or

List the CIDE core courses in which you are currently enrolled in the table below.

<i>CIDE Core Course Title</i>	<i>Course Number</i>	<i>Term</i> <small>(Semester, Year)</small> <i>Completed</i>	<i>Instructor</i>

**CIDE Elective Courses**

List the CIDE elective courses you have completed, and the year completed below.

<i>CIDE Elective Course Title</i>	<i>Course Number</i>	<i>Term</i> <small>(Semester, Year)</small> <i>Completed</i>	<i>Instructor</i>

**NOTE: Only certain versions of special topics courses are accepted for CIDE credit. Please see the CIDE Course Lists for accepted special topics courses.**

**2. Attendance at CIDE Seminar**

**Title and Date of CIDE Seminars**

Example: "All you need to know about applying for Attending Conferences" Carly Manion, September 20, 2016

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Title and Date of Newsletter Contribution (if applicable):**

\_\_\_\_\_

Approved submission of Reflective Summary (if applicable) on Seminar for CIDE repository equivalent to attendance at one CIDE seminar. Yes \_\_\_ No \_\_\_ Initial: \_\_\_\_

