## **DES 520**

## Graduate Seminar Data Sheet/Receipt

Fall Professional Practice I

**Credit Hours:** 4

www.evl.uic.edu/design/ seminar Office Hours: By Appointment

**Signature** 

**Lab:**2068 & 3036 Engineering
Research Facility
842 West Taylor Street

Daria Tsoupikova tsoupi@uic.edu

**Date** 

## **School of Design**

University of Illinois at Chicago

Student Dat	Sheet	and Syll	abus R	≀eceip	t
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Name:		
Major:		
Phone:		
Email address:		
Who to contact in an emerge	ency:	
Phone:		
Please list any refereces for dis	cussion software:	
O Zoom	O Slack	O other
O Piazza	O Blackboard Discussion	0
Please check if you are familia	r with any of the following softv	vare/programming languages:
O Adobe Photoshop	O Adobe Illustrator	O CSS
O C#	O Phino 3D	O HTML
O Unity	O JavaScript	О Мауа
Laptop / OS you have and year	of purchase - please circle	
	MacOS/Windows	year
Smartphone you have and yea	ar of purchase - please circle	
	Android / iPhone	year
Do you have any special requi	rements?	
I, the undersigned, have receive requirements of this course.	ved the syllabus for this course a	nd am familiar with the