

Biology Major - Check Sheet

2001-02 Catalog

Name _____
SSN _____

Catalog Description:

Major in Biology: The major requires completion of 36 hours of biology including 101, 102, 103, 104, 231, 322, and 336; and, in addition, one year (minimum of 6 hours) of mathematics or statistics and one year (minimum of 6 hours) of chemistry with laboratory. The total number of hours required for the major is a minimum of 48.

Check List (based on the above description):

Note: A grade of "C" or higher is required in all the courses listed below.

BIOL

Specifically Required (20 hours):

- | | | |
|---------|------------------------------------|--------------------|
| 101 (3) | <input type="checkbox"/> completed | _____ term planned |
| 102 (3) | <input type="checkbox"/> completed | _____ term planned |
| 103 (1) | <input type="checkbox"/> completed | _____ term planned |
| 104 (1) | <input type="checkbox"/> completed | _____ term planned |
| 231 (4) | <input type="checkbox"/> completed | _____ term planned |
| 322 (4) | <input type="checkbox"/> completed | _____ term planned |
| 336 (4) | <input type="checkbox"/> completed | _____ term planned |

Elective (at least 16)

- | | | |
|-----------|------------------------------------|--------------------|
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |

CHEM (one year, minimum 6 hours)

- | | | |
|-----------|------------------------------------|--------------------|
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |

MATH (one year, minimum 6 hours)

- | | | |
|-----------|------------------------------------|--------------------|
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |
| _____ () | <input type="checkbox"/> completed | _____ term planned |

Student Signature

Date

Program Coordinator Signature

Date

Department Chair Signature

Date

To be completed by the Registrar's Office

_____ Date received

_____ Date Reviewed

Notes:
