

# Election of Minor

## Biology (24 hours)

2019-2020 Catalog

Name \_\_\_\_\_ I.D. Number \_\_\_\_\_

Planned Degree Completion Date: Mo. \_\_\_\_\_ Yr. \_\_\_\_\_

Major: \_\_\_\_\_

### Required Courses

Do not write in shaded area

		<b>Hours</b>
<input type="checkbox"/>	BIOL 106 Principles of Biology I	3.0
<input type="checkbox"/>	BIOL 106L Principles of Biology I Lab	1.0
<input type="checkbox"/>	BIOL 108 Principles of Biology II	3.0
<input type="checkbox"/>	BIOL 108L Principles of Biology II Lab	1.0

### Sixteen hours of departmental electives:

<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	_____	_____	_____

Explain transfer, substitutions, or other irregularities:

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

*I understand I have final responsibility for monitoring my graduation requirements.*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form to the Office of the Registrar**