



ACADEMIC TENTATIVE DEGREE COMPLETION CHECKLIST

Student Name _____ Banner ID _____

Catalog Year _____ Anticipated Graduation Date _____ Advisor _____

Additional Comments: _____

YEAR 1 WL	Semester 1 Fall	Hours	Semester 2 Spring	Hours
	Semester Hours:		Semester Hours:	
	Notes:			

YEAR 2 WL	Semester 1 Fall	Hours	Semester 2 Spring	Hours
	Semester Hours:		Semester Hours:	
	Notes:			

YEAR 3 WL	Semester 1 Fall	Hours	Semester 2 Spring	Hours
	Semester Hours:		Semester Hours:	
	Notes:			

YEAR 4 WL	Semester 1 Fall	Hours	Semester 2 Spring	Hours
	Semester Hours:		Semester Hours:	
	Notes:			

COURSE ROTATIONS FOR REQUIRED COURSES:

BIO 302/303 HUMAN A&P I	Both semesters
BIO 317 IMMUNOLOGY	Spring only
BIO 325/326 MICROBIOLOGY & LAB	Both semesters
BIO 328/334 HUMAN A&P II & LAB	Both semesters
BIO 401 GENETICS	Spring only
BIO 460/461 MOLECULAR BIOLOGY	Fall only
BIO 470 BIOCHEMISTRY	Fall only
BIO 480 BIOLOGY CAPSTONE	Fall + Spring, in order

COURSE ROTATIONS FOR RESTRICTED ELECTIVES:

BIO 330 NUTRITION	Spring and Summer (online only)
BIO 343 VERTEBRATE ZOOLOGY	Check with Department Chair
BIO 407 HUMAN GENETICS	Request only
BIO 426 COMPARATIVE ANIMAL PHYSIOLOGY	Spring only
BIO 462 MICROBIAL PATHOGENESIS	Fall only
BIO 465 VIROLOGY	Even Springs