

Hours Completed _____
Catalog Term _____

DECLARATION OF MINOR IN GENETICS

Name: _____ Date: _____
UIN: _____ Major: _____
Email: _____ Expected Graduation Date: _____

Number of Required Semester Credit Hours of Genetics in **MAJOR** (_____)

COURSE NUMBERS

COURSE	CREDIT HOURS
GENE 320 or GENE 301 or GENE 302	3
GENE 412	3
GENE 431	3
STAT 302	3
Genomics or Bioinformatics*	3
TOTAL	15 HOURS

*BICH/BIOL 450, BICH 464, BIOL 451, BIOL 350 OR GENE 419
Must have a C or better in ALL minor coursework

Student's Signature: _____ Date: ____/____/____

Reviewed and Approved:

Minor Department Authorized Approval Signature: _____
Date: _____ Phone: _____

Reviewed and Approved:

Major Department Authorized Approval Signature: _____
Date: _____ Phone: _____

[] Entered in COMPASS form SZAREGS on ____/____/____ by Major Department

Xerox copies to: Student's Dean, Student, Major Department and Minor Department