

**CALIFORNIA STATE UNIVERSITY, LOS ANGELES**  
**PROGRAM FOR THE MASTER OF SCIENCES DEGREE IN BIOLOGY**

<b>NAME</b>	<b>CIN</b>
<b>ADDRESS</b>	<b>CONTACT PHONE #</b>
<b>EMAIL</b>	

<b>GRADUATE OF</b>	<b>DATE</b>	<b>DEGREE/MAJOR</b>
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**GPA in last 90 quarter units:**  
If GPA in last 90 units is below 2.75, four qualifying courses (\*) must be completed with a grade point average of 3.00 or better in the first two quarters or first 14 units of coursework.

<b>A. COREQUISITES TO BE COMPLETED</b>	<i>Units</i>	<i>Grade</i>	<i>Quarter Completed</i>	<i>Course Substitutions Approved in advance by graduate advisor</i>
<b>B. GRADUATE WRITING PROFICIENCY REQUIREMENT (Enroll in UNIV 400)</b>	0			
<b>C. ELECTIVES (minimum 20 units) Courses may be 400-level or 500-level and approved in advance by graduate advisor</b>				
<b>D. GRADUATE SEMINAR COURSES (minimum 25 units) - must be 500-level and approved in advance by graduate advisor</b>				
BIOL 500 Graduate Orientation	1			
BIOL 510 Graduate Seminar: Biology	1,1			
BIOL				
BIOL				
BIOL 594 Graduate Thesis Prospectus	1			
<b>Prospectus approved by Dept. of Biological Sciences</b>				Date approved:
BIOL 597 Graduate Research	6	<i>maximum enrollment: 2 units per quarter</i>		
BIOL 599 Thesis	9	<i>maximum enrollment: 3 units per quarter</i>		
<b>Research Seminar and Thesis Defense</b>				Date passed:
<b>TOTAL UNITS (Minimum 45, including 25 units of 500-level courses and GPA of 3.00 or better)</b>		<i>50% of the total units on program must be 500-level</i>		

**Signatures**

Applicant \_\_\_\_\_ Date \_\_\_\_\_

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

Graduate Advisor \_\_\_\_\_ Date \_\_\_\_\_

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

**Classified Standing** \_\_\_\_\_  
Qtr \_\_\_\_\_ Year \_\_\_\_\_

**Candidacy** \_\_\_\_\_  
Qtr \_\_\_\_\_ Year \_\_\_\_\_