

MS Biology with Thesis Program of Study

Name: _____

GT ID: _____

Date: _____

12 credit hours of Biology graduate courses with a letter grade (BIOL 6XXX – BIOL 8XXX)

Course Number	Credit hours	Grade	Year & Term

6 credit hours of other Biology courses with a letter grade (BIOL 4XXX or higher)

Course Number	Credit hours	Grade	Year & Term

Other required coursework

Course Number	Required	Earned	Grade	Year & Term
BIOL 8002	1			
BIOL 8003	1			
BIOL 7000	9			
BIOL 8901	7			

Approved Transfer Credits from Graduate Committee (if applicable)

Institution	Course Number	Credit hours	Grade	Year & Term

Signatures Required

Advisor (print name) Date

Biology Co-Advisor if Primary Advisor Outside School of Biology (print name) Date

School Committee Member (print name) Date

External Committee Member (print name) Date

Graduate Coordinator (print name) Date