

ST. CLOUD STATE UNIVERSITY

Application for Semester Program Approval: _____ MASTER OF ARTS IN BIOLOGICAL SCIENCES: Cell and Molecular Biology
_____ MASTER OF ARTS IN BIOLOGICAL SCIENCES: Ecology and Natural Resources

SCSU Student ID _____ Date _____

Name in Full _____ Email address _____

Local Address _____ City _____ State _____ Zip _____

Local Phone No. _____ Business Phone No. _____

I request the following graduate courses be transferred from: **(Official transcripts of all transfer credits which have been completed are required in the Graduate Office before program can be approved)**

Name of College or University		Address of College or University		
Dept. and Course No.	Name of College or University	Sem./Qtr. Hours	Grade	Date Taken
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(The area below the broken line should not be filled in by applicant)

I certify that this student is eligible for the proposed program approval and that I approve the program outlined in this application.

Signature of Adviser _____

The program outlined in this application complies with the minimum course requirements set by this university for the Master of Arts degree.

Signature of Graduate Dean _____

Student Notified: _____

PROPOSED SEMESTER PROGRAM OF GRADUATE STUDIES

Plan B only, Comprehensive Examination (Minimum 36 Cr.)

Major: _____ **Biological Sciences: Cell and Molecular Biology** _____ **Biological Sciences: Ecology and Natural Resources**

Dept.	Number	Name of Course	Instructor	Sem./Yr.	Credits	Grade
Required Biological Science Courses (minimum 12 credits):						
BIOL	610	Special Topics in Biology (to a max of 8)	_____	_____	<u>3-8</u>	_____
BIOL	628	Research Design	_____	_____	<u>2</u>	_____
BIOL	630	Seminar (1/semester for 3 sem. to a max of 4)	_____	_____	<u>3-4</u>	_____
_____	_____	600 level statistics course as approved by advisor	_____	_____	<u>3</u>	_____

Additional credits of electives in biological sciences or related field as approved by graduate committee.
Possible biology courses: BIOL: 514, 518, 520, 522, 530, 534, 536, 538, 540, 541, 542, 546, 549, 553, 555, 556, 557, 560, 562, 564, 566, 568, 572, 574, 576, 577, 578, 580, 582, 584, 586, 590, 650, 632, 633, 634, 635, 636, 637, 652, 666, 668, 670, 672, 674, 678, 680.

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Satisfactory completion of a written comprehensive examination approved by committee of faculty members.

Total Credits in Program: _____ _____ Signature of Applicant

- PROGRAM REQUIREMENTS:**
1. Credit limitation on transfer and extension credits (combined)--10 Cr.
 2. Credit limitation on Workshop--Plan B, 7 Cr.
 3. Required: one-half of minimum requirements for program must be completed in 600-level courses.