

Student: _____ Date: _____

Address: _____ Student ID #: _____

City: _____ State: _____ Zip: _____

Home: _____ Work: _____ Cell: _____

Email(s): _____

<u>CORE COURSE REQUIREMENTS</u>	<u>CREDITS</u>	<u>TERM</u>	<u>GRADE</u>
BIO 5203 Molecular Genetics	3	_____	_____
BIO 5273 Advanced Cell Biology	3	_____	_____
BIO 5313 Advanced Biostatistics	3	_____	_____
BIO 5323 Graduate Research Methods & Seminar	3	_____	_____
MED 5473 Medical Microbiology	3	_____	_____
BIO 5503 Advanced Biochemistry	3	_____	_____
HCA 5113 Healthcare Administration	3	_____	_____
HCA 5123 Healthcare Policy Analysis & Decision Making	3	_____	_____
<u>ELECTIVE COURSE REQUIREMENTS</u>			
MED 5513 Human Physiology	3	_____	_____
MED 6003 Medical Terminology	3	_____	_____
MED 6073 Fundamental Pharmacology	3	_____	_____
MED 6103 Immunology	3	_____	_____
TOTAL:	36		