

List below all approved transfer credit that is to be applied toward the degree.

Course Number	Course Title	Name of Instructor	Hours Credit	Quarter Taken
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Signature of Student

Date

Approved:

Chair, Advisory Committee Date

Director, School of Biological Sciences Date

Advisory Committee Member Date

Director of Graduate Studies (ANS) Date

Advisory Committee Member Date

Dean of the College (ANS) Date

Advisory Committee Member Date

Received: Graduate School Date

Advisory Committee Member Date

GS Form 6