

NEUROSCIENCE MAJOR STUDENT ELECTIVE APPROVAL FORM

Student Name:	Date:
Student ID:	Current Year:
Degree (BA/BS):	GPA:
Email:	Advisor:

GENERAL EDUCATION COURSES

Subject	Course Number	Course Title	Planned/Completed	Term
BIOS				
BIOS				
CHEM				
CHEM				
CHEM				
MATH				
MATH				
PHYS				
PHYS				
STAT				

NEUROSCIENCE MAJOR REQUIREMENTS

Subject	Course Title	Completed?	Planned? What term?
BIOS 24203	Fundamentals of Neuroscience	Yes No	_____
BIOS 24204	Introduction to Cellular Neurobiology	Yes No	_____
BIOS 24205	Introduction to Systems Neuroscience	Yes No	_____
PSYC 20700	Sensation and Perception	Yes No	_____
NSCI 20100	Neuroscience Laboratory	Yes No	_____

NEUROSCIENCE ELECTIVES

Subject	Course Number	Course Title	Planned/Completed	Term

Are you interested in the pre-med program? Yes No

Directions:

Before registering for electives, students must receive approval from the Director of Neuroscience Major. Complete this form and submit to the Director before registration. Once the Director signs off on chosen electives, this form must be submitted to Stephanie L. Thomas at thomassL@uchicago.edu.

For Office Use Only: Electives Approved:

 P. Mason, Director of Neuroscience Major