BIOLOGY PRE-MAJOR APPLICATION FORM
Department of Biological Sciences
College of the Sciences, Central Washington University

Name: ___________________________  Student ID#: ___________________________  Email: ___________________________

Last,  First,  Initial

Phone: (_____)____________________  Alt. Phone: (_____)_____________________

Class Level: (Circle one) FR  SO  JR  SR  GR  Catalog Year ___________________________

Do you have an AA, Bachelors degree? _______  From Where? ___________________________

Do you have a declared minor? _______  Are you withdrawing from a major? (please list) ___________________________

Please note you are declaring a pre-major, as you have not yet met the qualifications for a Biology major. Upon completing the qualifications for a Biology major, please complete a Biology Major Application Form.

Student: ___________________________  Signature  Date

Advisor: ___________________________  Signature  Date  Print Name

Dept. Chair: ___________________________  Signature  Date