

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