

**CELLULAR AND MOLECULAR MEDICINE SPECIALIZATION  
Student Record Form**

Name \_\_\_\_\_ Date \_\_\_\_\_  
 CSU Student ID No. \_\_\_\_\_ E-mail \_\_\_\_\_  
 Address (Home) \_\_\_\_\_  
 (CSU) \_\_\_\_\_  
 Phone (Home) \_\_\_\_\_  
 (CSU) \_\_\_\_\_

Home Program/ Department \_\_\_\_\_

**CMMS Curriculum Course Work**

Course	Course No.	Term	Grade
Graduate Biochemistry (BIO&CHM), 3 credits			
Molecular Biology and Genetics (BIO&CHM), 3cr			
Bioethics (all)			
BIO&CHM: at least one ___ Cell Biology, 3 credits <b>OR</b> ___ Macr. Struc. Dynamics, 3 credits <b>OR</b> ___ Physiology, 3 credits BME: at least two: ___ Physiology, 3 credits <b>OR</b> ___ Cell Biology, 3 credits <b>OR</b> ___ Biochemistry <b>OR</b> ___ Mol. Biol 3cr.			
Electives:			

\* Research Rotations: Advisors: \_\_\_\_\_ ; \_\_\_\_\_ ;  
 \_\_\_\_\_ ; \_\_\_\_\_  
 \* as required or optional according to rules of home department

Department Graduate Advisor: \_\_\_\_\_  
 Research Advisor: \_\_\_\_\_ ; Start Date: \_\_\_\_\_  
 Committee Members: \_\_\_\_\_ ; \_\_\_\_\_  
 \_\_\_\_\_ ; \_\_\_\_\_

Semester first started Graduate Program at CSU: \_\_\_\_\_  
 Candidacy Exams: Date: \_\_\_\_\_ ; Passed: \_\_\_\_\_ ; Failed: \_\_\_\_\_  
 Date: \_\_\_\_\_ ; Passed: \_\_\_\_\_ ; Failed: \_\_\_\_\_  
 Dissertation Defense: Date: \_\_\_\_\_ ; Passed: \_\_\_\_\_ ; Failed: \_\_\_\_\_  
 Date: \_\_\_\_\_ ; Passed: \_\_\_\_\_ ; Failed: \_\_\_\_\_

Dissertation Title: \_\_\_\_\_  
 Application for Ph.D. or Dr.E Degree commencement date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature of Departmental Advisor or Dissertation Advisor certifying accuracy)