

Request for Qualifying Examination

Type or Print Clearly

Student Name: _____
Last *First* *Middle*

Location: _____ Time: _____

Examining Committee	
Name	Department
<i>, Advisor</i>	<i>Biochemistry and Molecular Biology</i>

Approvals

 Department Head

 Date

 Director of Graduate Studies

 Date

Curriculum Vita for Qualifying Examination

Name: _____

Courses and Grades at LSUHSC - New Orleans:

Course Title	Course Number	Grade	Semester
Biochemistry	INTER 111		
Cell & Molecular Biology	INTER 121		
Molecular Genetic Mechanisms	INTER 122		
Ethics in Biomedical Sciences	INTER 220		
Responsible Conduct in Research	INTER 260		
Introduction to Special Methods of Research	BIOCH 207		
Seminar	BIOCH 298 and 299		
Electives			

Laboratory Rotations:

Laboratory Director	Dates of Rotation

* Pre-matriculation Research Experience and Papers Published (if applicable):

