



# Engineering Biology Certificate Program Application Form

Name \_\_\_\_\_ Class Year \_\_\_\_\_

ID# (9 digit) \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_ Senior Thesis Advisor (Seniors only) \_\_\_\_\_

### Requirements to receive the certificate:

*Please check the box that reflects your current status.*

*Write what class(es) you took that fulfills the requirement.*

*If you haven't taken them yet, write what class(es) you will take and when.*

One foundational course in molecular and cellular biology (MOL 214 or equivalent course)

Yes  No  \_\_\_\_\_

One foundational course in computing (COS 126 or equivalent course)

Yes  No  \_\_\_\_\_

List three bioengineering courses from the approved course list.

Yes  No  Course 1 \_\_\_\_\_ Outside the dept. of concentration

Yes  No  Course 2 \_\_\_\_\_ Senior departmental course

Yes  No  Course 3 \_\_\_\_\_ Senior departmental course

One advanced life science course from the approved course list.

Yes  No  \_\_\_\_\_

The title or topic of your two-semester thesis or senior independent work in an appropriate area of engineering biology that has been approved by the Program Director:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student's Name (Printed)      Student's Name (Signature)      Date

\_\_\_\_\_  
Celeste M. Nelson, Director      Director's Name (Signature)      Date