

**ECOLOGY AND SYSTEMATIC BIOLOGY DEGREE  
CONCENTRATION FORM  
INDIVIDUALIZED COURSE OF STUDY  
FOR THE 2003-2005 CATALOG**

Name: \_\_\_\_\_ Empl ID # \_\_\_\_\_  
 Local Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Catalog Year: \_\_\_\_\_ Career Goal: \_\_\_\_\_  
 Curriculum objective: \_\_\_\_\_

SAMPLE COPY ONLY

<u>Course #</u>	<u>Course Title</u>	<u>COURSES TO BE COMPLETED</u>	<u>Units</u>	<u>Quarter</u>	<u>Grade</u>
Adviser approved electives (totaling at least 28 units)					
_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
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_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
_____	_____		_____	_____	_____
Total units =			_____		

**Please note:** This course of study **requires a minimum of 28 units**. The courses are not restricted to those offered in the Biological Sciences Department. The above course of study should be developed in consultation with your Faculty Adviser and must receive his or her approval.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Adviser Approval \_\_\_\_\_ Date \_\_\_\_\_