Bates College - Department of Biology - Rev. 8/2014
Biology Comprehensive Examination Registration Form

Please complete and submit this form to Dr. Donald Dearborn of the Department of Biology at least one week prior to the scheduled Comprehensive Exam date. You will be notified of where and when to take the exam.

NAME: __________________________________________ PHONE: (___) __________
BOX#: ___________________ EMAIL: __________________________
EXAM DATE: ___________________
HAVE YOU TAKEN THE GRE SUBJECT TEST IN BIOLOGY? _______ DATE: ___________ SCORE: ______

Please list below the chemistry and biology courses you have taken at bates (include year and semester), or, approved courses from other institutions that have been applied to your biology major. If you were exempted and did not take one or more of the biology core courses or chemistry courses, tell us why this might cause us to alter the make-up of your exam.

CHEMISTRY COURSES:

• CHEM 107/108_________ OTHER: __________________
• CHEM 218_____________ OTHER: __________________
• CHEMISTRY ALTERNATIVES: Chem 203, 212 or Geology 363):____________________

100-LEVEL BIOLOGY COURSES:

• _____________
• _____________W/LAB

THE CORE:

• BIO 190 ________ OTHER: __________________
• BIO 270 ________ OTHER: __________________
• BIO 242 ________ OTHER: __________________

THE ELECTIVES:

• BIO ___ OTHER: __________________
• BIO ___ OTHER: __________________
• BIO ___ OTHER: __________________
• BIO ___ OTHER: __________________
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THESIS TITLE (if applicable):________________________________________________________
_______________________________________________________________________________

COMMENTS?