

# Immunology and Infection Program – Honors 2016/2017

Please be aware that by neglecting to pay confirmation deposit by specified deadline, your entire registration will be deleted.

ID#	LAST NAME	FIRST NAME	YR
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**\*78 REQUIRED COURSES:**

“P” means Pending i.e. you are currently in or are going to take the course

BIOCH 200 <input type="checkbox"/> P _____ (*3)	CHEM 263 <input type="checkbox"/> P _____ (*3)
BIOL 107 <input type="checkbox"/> P _____ (*3)	IMIN 200 <input type="checkbox"/> P _____ (*3)
BIOL 108 <input type="checkbox"/> P _____ (*3)	MICRB 265 <input type="checkbox"/> P _____ (*3)
BIOL 201 <input type="checkbox"/> P _____ (*3)	IMIN 324 <input type="checkbox"/> P _____ (*3)
BIOL 207 <input type="checkbox"/> P _____ (*3)	IMIN 371 <input type="checkbox"/> P _____ (*3)
BIOL 208 <input type="checkbox"/> P _____ (*3)	IMIN 452 <input type="checkbox"/> P _____ (*3)
CHEM 101 <input type="checkbox"/> P _____ (*3)	MMI 351 <input type="checkbox"/> P _____ (*3)
CHEM 102 <input type="checkbox"/> P _____ (*3)	ZOOL 352 <input type="checkbox"/> P _____ (*3)
CHEM 164 or 261 <input type="checkbox"/> P _____ (*3)	STAT 141 OR 151 <input type="checkbox"/> P _____ (*3)
BIOL 499 OR MMI 499 <input type="checkbox"/> P _____ (*3)	_____ (*3)
1 of MATH 113, 114 or 125 <input type="checkbox"/> P _____ (*3)	
1 of BIOL 391, IMIN 391 OR MMI 391 <input type="checkbox"/> P _____ (*3)	
ZOOL 241 and 242; or PHYSL 210; or 212 and 214 <input type="checkbox"/> P _____ (*3)	_____ (*3)
GENET 270 or BIOCH 330* <input type="checkbox"/> P _____ (*3)	
1 of BIOCH 430; GENET 304; MICRB 316 <input type="checkbox"/> P _____ (*3)	

**\*9 IMIN OPTIONS** from the Options List below: (At least \*3 must be a laboratory course).

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

**\*15 APPROVED OPTIONS** from the Options List below or options approved by an advisor.

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

**OPTIONS LIST:** BIOCH 320, 330, 430, 450; BIOL 391, 409; CELL 300; ENT 378; GENET 304; IMIN 372, 391, 401, 405, 410; MICRB 316, 410; MMI 352, 391,405, 415, 426, 436, 445; ZOOL 354, 452.

**\*18 ARTS OPTIONS (junior level ENGL or junior WRS recommended)**

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

**REGISTRATION FOR THE \_\_\_\_\_ ACADEMIC YEAR:**

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

\_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3) \_\_\_\_\_ (\*3)

**Total Junior Credits to date (max = 42):** \_\_\_\_\_

**Total Outside Credits (max = 12):** \_\_\_\_\_

**NOTES (if any):** \_\_\_\_\_

**I have advised this student and approve the program as outlined above:**

**Advisor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I am aware that it is the student’s responsibility for the completeness and accuracy of his/her registration and for the completion of the specified program requirements. This requires careful attention to course selection and compliance with prerequisite and co-requisite requirements.

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Note:**

Transfer Credit: A maximum of two years of transfer credit will be granted towards a U of A undergraduate degree program (\*60).

\* GENET 270 is the prerequisite for GENET 304, MICRB 316; while BIOCH 320 and 330 are prerequisites for BIOCH 430