Hours Completed_	
Catalog Term	

DECLARATION OF MINOR IN BIOINFORMATICS

Email form to advising@bio.tamu.edu

Name:	Date:		
UIN:	Major:		
Email:	Expected G	Expected Grad date:	
	COURSE NUMBERS		
raquiraments	d in all courses used to meet minor	HOURS	
A) CSCE110 or CSCE111		4	
B) BIOL213, GENE302 or G		3	
C) BIOL349			
D) Choose two from the following		6-8	
BIOL450, BICH464, BICI	H/GENE419, VTPP438,		
BIOL430, or STAT446			
	ГОТАL	16-18 HOURS	
Student Signature:		Date:	
Reviewed and Approved:			
Minor Department Authorized Appro	oval Signature:		
Date:	Office Phone:		
Reviewed and Approved:			
Major Department Authorized Appro	oval Signature:		
Date:	Office Phone:		
[] Entered in COMPASS form SZA	REGS on (Date) B	y Major Department	
Copy sent to: Student's Dean, Studen	nt, Major Dept. and Minor Dept.		