

Doctoral Degree – Ecology Degree Program and Certification Form

Name of student: _____

BS/BA from: _____ Date: _____ Major: _____

MS (or equivalent) from: _____ Date: _____

Date entered MU Ph.D. Prog.: _____ Conditions: _____

Doctoral Committee Membership *

Major professor: _____ Date selected: _____

For additional committee members, indicate home department and, by means of an asterisk, those faculty who are Ecology Program Faculty Associates)

Grad. School Representative: _____

At least 3 other members:

Program Chair Approval: _____ Date: _____

* Program Chair approval must be obtained BEFORE committee meeting.

MINIMUM BACKGROUND PREPARATION: (Indicate when and where courses were taken, or how made up)

Ecology: _____

Physiology: _____

Genetics: _____

Systematics/Taxonomy/Biodiversity: _____

Calculus: _____

COURSE REQUIREMENTS: (Indicate course, institution, date taken or to be taken)

Course	Institution	Term	Year
BOT 600.A Pedagogy for Grad Students	MU	Sum IV	_____
BOT 660. Graduate Colloquium	MU	FALL	_____
Graduate Ecology Seminars (at least 4 semesters)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

