Name:			Student ID #:			
Graduation Year:				Email:		
Please fill out the this fo	rm and turn it	into the Pha	armacy Stude	nt Service Office A Phar	macy Academic Advisor	
will review your form an			-		-	
next year. If you cannot	•					
				-		
Sciences		Semester	Completed:	Where Completed:		
Organic Chemistry I - Chem 321/L						
Organic Chemistry II - Chem 322R/L Anatomy - LSAnat 119/L						
Cell Biology - Bio 202						
Microbiology - LSMicro 121						
Biochemistry I - LSBioC 3						
Biochemistry II - LSBioC						
Medical Terminology - P	har 7125]	
General Requirements		Semester	Completed:	Where Completed:		
English Comp II - Eng 225						
Speech - CommSt 110						
Constitution Requirement	nt					
One of the following:	Hist 101					
	Hist 102					
	Hist 360					
	PolSci 210					
WEPTExempt based on previous bachelor degre			r degree.	Taken & Passed	I'll take it:	
Professional Electives:	Pharm D. stuc	lents are requ	uired to have	completed		
Professional Electives: Pharm.D. students are required to have completed at least 10 credit hours before the beginning of their first Advanced Pharmacy						
Practice Experience. At least 5 hours must be considered an Inside Rx Elective.						
Course(s) taken before the first Pharm.D. semester do not count.						
Inside Pharmacy						
Course (i.e. Phar 7313)	Semester	Hours				
			-			
Total Inside Credit Hours:			_			
Outside Pharmacy (only count up to 5		i hours)				
Course (i.e. Chem 206)	Semester	Hours		tal Outside Credit		
				ours cannot exceed		
				hours. If you have		
Total Outside				o 3 hour courses, one of them as 2		
Total Outside Credit Hours: Total Credit Hours:				edit hours		