## Department of Biological Sciences, Hunter College, CUNY

## Course Evaluation Request Form PLEASE PRINT DO NOT USE SCRIPT

Name:	Date:		
Email:	Phone:		
MPL ID# Expected Ma			
<ol> <li>2. A <u>Course Syllabus</u> from you (Syllabus <u>should include</u>: cours applicable)</li> <li>3. This completed Course Extern all documents to the <u>Submitted documents will</u> Evaluation period is 4 – 6 we <u>INCOMPLETE FORMS VERIOR STORMS VERIOR S</u></li></ol>	official Transcript (NOT Degree Works or transfur previous school for each course you wish to have description, textbook information, weekly lected advantage of the second secon	ave evaluated. ure topics, and we h.	·
Previous College Name: _ COURSE NUMBER & NAMI	E (at Previous College):	Credits	Lab (Y/N)
			<u> </u>
			<u> </u>
I am requesting a course evalua	ation for the following:		
Principles of Biolog (BIOL 100 and/or BIOL	•	Anatomy & Physiology (BIOL 120 and/or BIOL 122)	
Microbiology (BIOL 230)	Biology Major	r Elective Credi	t