

## Application for CAMS Mathematical Biology Minor

Complete application and submit along with the **Registrar's Declaration of Minor Form** to the Registrar's Office | Blow Hall | Room 124. **Retain a copy for your records.**

Name \_\_\_\_\_ Student ID # \_\_\_\_\_ CSU Box # \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_ Advisor/Dept \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

**List only those courses which are to be counted toward your Minor**

	COURSE	COURSE TITLE	CREDIT HOURS	OFFICE USE ONLY				
				Dept	No.	Course Title	Date	Initial
Mathematical Modeling (2 courses )	(Choose 1 or 2) APSC/BIOL 351 APSC 456/BIOL 404	Cellular Biophysics and Modeling <b>AND/OR</b> Random Walks in Biology	3					
	(Choose 0 or 1) BIOL 325 MATH 345	Introduction to Quantitative Biology <b>OR</b> Introduction to Mathematical Biology	3 or 4					
Programming (1 course)	CSCI 141 <b>OR</b> PHYS 256	Computational Problem Solving <b>OR</b> Practical Computing for Scientists	3 or 4					
Statistics & Data Analysis (1 course)	BIOL 425 MATH 106 MATH 351 MATH 352 PSYC 301	Introduction to Biostatistics Elementary Probability & Statistics Applied Statistics Data Analysis Elementary Statistics	3 or 4					
Electives								

\*For a list of elective courses, please refer to the online Course Catalog.

Total Credit Hours \_\_\_\_\_  
(minimum of 18 credit hours)

I certify that these courses fulfill the requirements for a minor in CAMS Mathematical Biology.

Approved by Advisor \_\_\_\_\_ Date \_\_\_\_\_

Approved by Director of CAMS **OR** CAMS Mathematical Biology Track Director \_\_\_\_\_ Date \_\_\_\_\_