

Last Name: _____ First Name: _____ Date: _____

ID#: XXX-XX-_____ MAJOR: SCIENCE OF FORENSICS (75)

I. DEVELOPMENTAL REQUIREMENTS:

- ☞ Student Passed/Exempt Reading CUNY Examination
 - ☞ Student Failed Reading CUNY _____ score
 - ☞ Student Passed/Exempt Writing CUNY Examination
 - ☞ Student Failed Writing CUNY _____ score
 - ☞ Student Passed CUNY Math or COMPASS
 - ☞ Student Failed CUNY Math or COMPASS
- Old Test: Parts 1 and 2 _____
(Total Score)
- COMPASS: M1 _____ M2 _____ M3 _____ M5 _____

II. COLLEGE REQUIREMENTS: 7 credits

Note: All courses with an asterisk (*) have a pre-requisite.

Course	Credits	Course	Credits	Course	Credits
☞ Eng 12*		☞ Eng 24*		☞ HE14	

(One (1) Writing Intensive course in any discipline from any category below is required. Such courses are designated “W”.) Participation in a Learning Community that includes ENG 12 also satisfies this requirement.

III. DEPARTMENT REQUIREMENTS: Note: All courses with an asterisk (*) have a pre-requisite. Also, a cumulative grade point average of 2.5 is required in the following 34 credits of science:

Course	Credits	Course	Credits	Course	Credits	Course	Credits	Course	Credits
☞ BIO 13*		☞ CHM 11*		☞ CHM 31*		☞ PHY 13 *		☞ MAT 15*	
☞ BIO 14*		☞ CHM 12*		☞ CHM 32*		☞ PHY 14*		☞ MAT 16*	

IV. GENERAL EDUCATION REQUIREMENTS: 9 credits

The following courses reflect the joint registration of this program with the B.S. in Forensic Science offered by John Jay College of Criminal Justice. Students must select one course from Group A, one course from Group B and one course from Group A or B.

- A. Arts and Humanities 3 – 6 credits
ENG 32 or ENG 35 or PHI 71 or PHI 72
- B. Behavioral and Social Sciences 3 – 6 credits
HIS 31 or HIS 52 or ANT 37 or PSY 11 or SOC 31
- C. Mathematics and Sciences – Satisfied by Department Requirements

ELECTIVES: 2 credits sufficient to meet required total of 60 credits

SEMESTER: Fall _____ Spring _____

MODULE: Winter _____ Summer _____

Course	Credits/Equated Credits
1.	
2.	
3.	
4.	
5.	

Course	Credits/Equated Credits
1.	
2.	

MODULE: Winter _____ Summer _____

Course	Credits/Equated Credits
1.	
2.	

____ As a student who is part of the Access-Ability Center, I know that I am advised to return to room D-205 for any course modifications or discussion of accommodations.

I have read and understand that this is what I need in order to satisfy my degree requirements.

Advisor Signature: _____ Student Signature: _____ Date: _____