



**MEDICAL LABORATORY SCIENCE Academic Concentration  
DEGREE AUDIT SHEET  
Effective Fall 2020**

Name : \_\_\_\_\_ ID# \_\_\_\_\_ Advisor \_\_\_\_\_

Intended Month/Year of Graduation \_\_\_\_\_ Dept Chair Approval \_\_\_\_\_

**General Education**

**Communication Skills (9 credits)**

Course	Grade	Credit	Semester
ENGL110	_____	_____	_____
ENGL111	_____	_____	_____
COMM101	_____	_____	_____

**Humanities (7-8 credits)**

Choose two courses according to the General Education requirements published in the LSSU Catalog

\_\_\_\_\_ \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_

**Social Sciences (6-8 credits)**

Choose two courses from different disciplines

\_\_\_\_\_ \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_

**Cultural Diversity (3-4 credits) Choose one course**

\_\_\_\_\_ \_\_\_\_\_

**Math Courses (6 credits)**

Course	Grade	Credit	Semester
MATH111	_____	_____	_____
MATH207	_____	_____	_____

**Chemistry Minor (26 credits)**

CHEM115	_____	_____	_____
CHEM116	_____	_____	_____
CHEM225	_____	_____	_____
CHEM231	_____	_____	_____
CHEM332	_____	_____	_____
CHEM351	_____	_____	_____

**Directed Electives (3-4 credits) Choose one course from:**

BIOL425, BIOL433, or CHEM326

\_\_\_\_\_ \_\_\_\_\_

**Biology Core Courses (59 credits)**

Course	Grade	Credit	Semester
BIOL131	_____	_____	_____
BIOL132	_____	_____	_____
BIOL199	_____	_____	_____
BIOL204	_____	_____	_____
BIOL206	_____	_____	_____
BIOL220	_____	_____	_____
BIOL280	_____	_____	_____
BIOL299	_____	_____	_____
BIOL306	_____	_____	_____
BIOL330	_____	_____	_____
BIOL337	_____	_____	_____
BIOL380	_____	_____	_____
BIOL399	_____	_____	_____
BIOL406	_____	_____	_____
BIOL422	_____	_____	_____
BIOL423	_____	_____	_____
BIOL455	_____	_____	_____
BIOL480	_____	_____	_____
BIOL499	_____	_____	_____

2.0 Overall GPA.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
At least 124 Total Credits.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.0 Department GPA .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.5 Chemistry minor GPA .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Residency (30 of last 60 credits).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Residency (50% of 300/400 courses).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I certify that all Departmental requirements are complete and the Departmental grade point average is 2.0 or higher.		
_____	_____	_____
Final Approval		Date