

Touro College/Advisement and Counseling Service Major Form

Student's Name _____ ID# _____ Telephone Number _____
 Expected Date of Graduation _____ Advisor _____

Pre - Pharmacy

		<u>Credits</u>	<u>Grade</u>	<u>Semester taken</u>	<u>Semester to be taken</u>
<u>Required Courses - Sciences (39 Credits)</u>					
BIO 101	Principles of Biology I	4	_____	_____	_____
BIO 102	Principles of Biology II	4	_____	_____	_____
BIO 222	Anatomy and Physiology I	4	_____	_____	_____
BIO 223	Anatomy and Physiology II	4	_____	_____	_____
BIO 228	Microbiology	4	_____	_____	_____
CPC 101	General Chemistry I	4	_____	_____	_____
CPC 102	General Chemistry II	4	_____	_____	_____
CPC 201	Organic Chemistry I	4	_____	_____	_____
CPC 202	Organic Chemistry II	4	_____	_____	_____
CPC 311	Biochemistry I	3	_____	_____	_____
<u>Other Required Courses (16 Credits)</u>					
COC 101	Public Speaking	3	_____	_____	_____
EBE 102	Microeconomics	3	_____	_____	_____
LLE 101	English Composition I	3	_____	_____	_____
LLE 102	English Composition II	3	_____	_____	_____
MAT 121	Calculus	4	_____	_____	_____
<u>Other Suggested Courses</u>					
MAT 261	Statistics for Social Science Majors	3	_____	_____	_____
SAS 103	Introduction to Sociology	3	_____	_____	_____
SAS 103	Sociology of Health and Illness	3	_____	_____	_____
PSY 101	Introduction to Psychology	3	_____	_____	_____
PSY ____	Psychology Elective: _____	3	_____	_____	_____
_____	_____	3	_____	_____	_____
_____	_____	3	_____	_____	_____
_____	_____	3	_____	_____	_____

Total Credits in Program: 120 Total Completed: _____ * taken outside Touro

Comments:

- Each Pharmacy School sets its own requirements for admission. The above list patterned after the requirements at Touro's own Pharmacy School. The requirements listed above are minimums only.
- Pharmacy related volunteer experience, pharmacy related work, and community service are required.
- These courses do NOT satisfy the requirements to graduate from Touro- College. Students must complete all college requirements including core requirements and any major of their choice.

 STUDENT'S SIGNATURE
 FILE: AMH/MAJOR FORM-PREPHARMACY 8-2010

 APPROVED: ADVISOR'S SIGNATURE

 DATE