



Department of Biology
 1801 E. Cotati Avenue
 Rohnert Park, CA 94928
 (707) 664-2189

Sec #: _____

Class #: _____

Perm Code: _____

BIOLOGY 599: M.S. THESIS

Name: _____ ID No.: _____
 Email: _____@sonoma.edu Phone: _____
 Units to Take: 1 2 3 Semester/Year: _____

Date your Advancement to Candidacy was accepted by the Graduate Dean: _____

You will be assigned a grade of SP until the thesis is completed, and must complete the work within four semesters from the date of your first enrollment in 599.

Approval:

Instructor/
 Thesis Advisor: _____

Dept. Chair: _____

Dean: _____

STUDENTS:

1. Complete this form, have your instructor and advisor sign, and leave in the Biology office (Darwin 200) for the remaining signatures.
2. Your form will be ready for you to pick up in 2-3 days; it will also be emailed (to your sonoma.edu) as an attachment with information for adding the course to your schedule. **It is your responsibility to add the class to your schedule!**
3. Questions? Email biology@sonoma.edu or stop by Darwin 200 during office hours.