

**Indiana University**  
**Human Biology**  
**Area Certificate Application**

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Email Address: \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_ Exit Survey: Yes /No

Student ID#: \_\_\_\_\_ School/College: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

GPA (Certificate Program): \_\_\_\_ GPA (cumulative): \_\_\_\_ Expected Graduation Date (Mo/Yr) \_\_\_\_

The student desiring an Area Certificate in Human Biology must complete the following courses (28 to 29 credit hours) Mark Completed Courses

<b>Course Requirements for Certificate in Human Biology</b>	<b>Letter Grade</b>	<b>Grade Points</b>
BIOL L112 (3) Introduction to Biology; Biological Mechanisms		
BIOL L211 (3) Molecular Biology		
MSCI M131 (3) Human Body and Disease		
ANAT A215 (5) Basic Human Anatomy		
PHSL P215 (5) Basic Human Physiology <u>or</u> BIOL P451 (4) Integrative Human Physiology		
BIOL L350 (3) Environmental Biology <u>or</u> ANTH B370 (3) Human Variation		
PSY P201 (3) An Introduction to Neuroscience <u>or</u> PSY P315 (3) Developmental Psychology <u>or</u> PSY P326 (3) Behavioral Neuroscience		
REL R373 (3) Religion, Ethics, and Medicine		
HUBI B480 (1) E-portfolio Capstone Course		

Academic Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(5 carbon copies) Dean of the student's college or school, major department, minor department, the student, and the Human Biology Certificate Program office