

BIOMEDICAL FORENSIC SCIENCES PROGRAM

DEPARTMENT OF ANATOMY AND NEUROBIOLOGY
DIVISION OF GRADUATE MEDICAL SCIENCES
BOSTON UNIVERSITY SCHOOL OF MEDICINE

REQUEST FOR NON-BMFS COURSE APPROVAL (BU)

BU Course Number and Name:

Number of credits:

Please attach a copy of the BU course description, course syllabus and instructor contact information.

*Students seeking to take a BU course from outside of the Biomedical Forensic Sciences program must *first* get permission to enroll in the course from the course instructor

* A maximum of 8 credits earned outside of the Biomedical Forensic Sciences program can be applied toward the Master's degree

Student name: _____

Date: _____

Student signature: _____

Date: _____

Course approved: _____

Course not approved: _____

Advisor signature: _____

Date: _____

Program Director signature: _____

Date: _____

