



School of Health and Environment
 Department of Physical Therapy
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Prerequisite Course Checklist

Applicant Name: _____ Date: _____

For each prerequisite listed indicate name of course, institution where taken, date, number of credits and grade received. If the course has not been completed indicate plan for completion and the date for the completion.

Note: All science courses must be completed within the last 10 years.

Prerequisite Course	Course Name	Credits	Grade	Quality Points	Completion Plan
Psychology Course					
Statistics					
The following courses are used to calculate Science GPA					
Anat. & Physiology I/lab					
Anat. & Physiology II/lab					
General Chem. I/lab					
General Chem. II/lab					
Physics I/lab					
Physics II/lab					
Kinesiology /lab					
Exercise Physiology/lab					

Science GPA _____

Return with your completed application.