

**Botany and Plant Pathology – Performance Expectations**

**Student:** \_\_\_\_\_ **Semester:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**Advisor:** \_\_\_\_\_ **Degree Program:** \_\_\_\_\_

CRN	SUBJECT	COURSE #	Credit Hours	Course Name
	<b>BTNY</b>			Please ensure the CRN corresponds to the correct faculty and degree program RESEARCH 698 or 699

*\*This table is for your own organizational records. All Graduate Students are required to register and confirm their own course and research selections in the Scheduling Assistant.*

**Coursework Expectations**

**Research Expectations**

**Advisor Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Student Signature** \_\_\_\_\_

**Date** \_\_\_\_\_