



Zuckerberg College of Health Sciences
 Department of Physical Therapy and Kinesiology
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 Lowell, Massachusetts 01854-5124
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 fax : 978.934.1069
 web site: <http://www.uml.edu/health-sciences/PT/>

Pre-Requisite Course Checklist

Applicant Name: _____ Date: _____

For each prerequisite listed please denote the associated information. If a course has not yet been completed, please indicate the plan, and anticipated date, for completion.

Prerequisite Course	Course Name & Institution	Credits	Grade	Quality Points	Completion Plan
Pharmacology					
Psychology					
Statistics					
The following courses are used to calculate Pre-Requisite Science GPA					
Anat. & Physiology I/lab					
Anat. & Physiology II/lab					
General Chemistry I/lab					
General Chemistry II/lab					
Physics I/lab					
Physics II/lab					
Kinesiology (Biomechanics)					
Exercise Physiology					

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

Pre-Requisite Science GPA: _____

Please submit completed form along with your application to:

*The University of Massachusetts Lowell
 Office of Graduate Admissions
 Cumnock Hall, Suite 110
 One University Avenue
 Lowell, MA 01854-3931*

<https://www.uml.edu/grad/>

Fax: 978-934-4058

Email: Graduate_Admissions@uml.edu