

Thomas Jefferson University
Doctor of Physical Therapy Prerequisite Worksheet
 Complete and return with Admissions Application

Student Name: _____ SS#: _____

Course Requirement	Credits Req'd	Course Name and Number	Credits Earned	School/Institution attended	Date Complete/To be Completed
Physiology w/lab	4				
Anatomy w/lab	4				
General Biology I w/lab	4				
General Biology II w/lab	4				
General Chemistry I w/lab	4				
General Chemistry II w/lab	4				
Physics I w/lab	4				
Physics II w/lab	4				
Statistics	3				
College Algebra, Trigonometry or Higher	3				
Ethics or Philosophy	3				
English Composition	3				
English Elective	3				
Abnormal Psychology	3				
Developmental Psychology	3				
Sociology or Anthropology	3				
Nutrition or Health and Wellness	3				
Total	59				

**** Course Acceptance Subject to Academic Counselor Approval****

If you have any questions please contact
 Jefferson College of Health Professions, Office of Admissions
 1-877-JEFF-CHP (1-877-533-3247) or
 215-503-8890