

# 2017 UCI SUMMER SESSION

## REQUEST FOR BIOLOGICAL SCIENCES 197 INDEPENDENT STUDY

**INSTRUCTIONS:**

1. Student obtains this form and fills it out with instructor.\*
  2. Students engaged in biomedical research must have an abstract and Signed Waiver & Release of Liability Form on file in the Biological Sciences Student Affairs Office.
  3. Student/Faculty member submits this form to the Biological Sciences Student Affairs Office for approval.
  4. Student must submit **this approved form**, an **enrollment form**, and **payment** to the Summer Session Office prior to deadlines. (Incomplete forms will not be accepted.)
- \* Must complete in ink. To ensure the integrity of the form and authorizing signatures, forms with alterations such as white-outs, cross-outs, or scanned signatures will not be accepted.

FOR OFFICE USE ONLY
<b>LAST, F.I.:</b> _____
SESSION: _____
SECTION: _____
CODE: _____
COURSE TYPE: _____
INSTRUCTOR ID: _____

**STUDENT INFORMATION:** TO BE COMPLETED BY STUDENT

STUDENT NAME: \_\_\_\_\_  
(LAST, FIRST MIDDLE)

STUDENT EMAIL: \_\_\_\_\_

UCI OR SUMMER SESSION ID #: \_\_\_\_\_

FOR BIO SCI 197, STUDENTS MUST HAVE COMPLETED BIO SCI 194S SAFETY COURSE OR EQUIVALENT.  
 INDICATE COMPLETION INFORMATION BELOW:

QUARTER & YEAR: \_\_\_\_\_ INSTITUTION & COURSE: \_\_\_\_\_

**COURSE INFORMATION:** TO BE COMPLETED BY FACULTY SPONSOR AND STUDENT

All information **MUST** be provided accurately and in full, including units.

**DEPARTMENT & NUMBER:** **BIOLOGICAL SCIENCES 197, Directed Group Studies**

**TITLE (UP TO 19 CHARACTERS):**  
 (AS SHOWN ON TRANSCRIPT)  
 Specify research area

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(to be completed by Biological Sciences Student Affairs Office)

**SESSION & UNITS:**       SESSION 1 : \_\_\_\_\_ UNITS                       SESSION 2 : \_\_\_\_\_ UNITS  
 10-WK SESSION : \_\_\_\_\_ UNITS

**FACULTY SPONSOR:** \_\_\_\_\_  
PRINT FULL NAME

**FACULTY UCI.netID:** \_\_\_\_\_

**INSTRUCTOR NOTES:**                      \* **GRADE SUBMISSION IS DONE ONLINE WITH YOUR UCI.netID USING WebGrades.**  
    \* **ALL ACADEMIC CORRESPONDENCE WILL BE MADE TO YOUR UCI EMAIL ACCOUNT.**  
    \* **THERE IS NO REMUNERATION FOR INDEPENDENT STUDY COURSES.**

**APPROVAL:** TO BE COMPLETED BY FACULTY AND BIOLOGICAL SCIENCES STUDENT AFFAIRS

**FACULTY SPONSOR:** \_\_\_\_\_  
 SIGNATURE

**BIOLOGICAL SCIENCES:** \_\_\_\_\_  
 BIOLOGICAL SCIENCES STUDENT AFFAIRS