BIOLOGY 599 - Independent Study
APPLICATION FOR REGISTRATION

Name: _____ School _____
Last First MI

Penn ID # _____ Email _____

Applying for BIOL 599: Registration for BIOL 599 is by permit only. The Biology Academic Office in Leidy 102 will issue section numbers for those permitted to enroll in the course. This form must be signed by your sponsor (the person in whose lab you are working) and the Program director (Dr. Brisson).

Guidelines for BIOL 599: Prior to enrollment in independent study, the **faculty sponsor** and **student** must agree to the following policies by signing this document.

1. Faculty sponsors must agree that the student can use all data generated during the project in preparing the required Master's thesis. BIOL 599 students cannot work on projects in which data will be withheld due to commercial agreements or any other barrier to free dissemination of information.
2. Projects that have a strictly clinical focus are usually not suitable for BIOL 599 research.
3. Students must be trained in laboratory safety, radiation safety, and care of animals when relevant. The faculty sponsor is responsible for ensuring that the student receives this training.
4. BIOL 599 consists of 500 research hours which can include reading, laboratory/field research time, meetings with research mentors, seminars approved by the faculty sponsor, and Thesis preparation when applicable. Students cannot be paid for hours that fulfill BIOL 599 requirement.
5. The faculty sponsor and student must conduct an exit interview at the culmination of the research experience before grades can be assigned. During this meeting, the faculty sponsor must provide the student with a completed evaluation form and discuss the possibility of the student continuing research with the faculty sponsor. The form should be returned to the academic office.
6. Grades for BIOL 599 will be decided by the Faculty sponsor upon completion of the required research hours.
7. Sponsors may not waive any of the above requirements.

We acknowledge and agree to follow the policies outlined above.

_____
Student Signature

_____ _____
Sponsor's Name and Position/Department Signature
(must be a member of the Biology Graduate group)

_____
Sponsor's e-mail address

_____
Program Director Signature

Copies of the signed agreement will be sent by e-mail to the student and sponsor for your records.