

DEPARTMENT OF BIOCHEMISTRY AND MICROBIOLOGY

RESEARCH EXPERIENCE (VOLUNTEER) REGISTRATION

BCMB 298 ... BCMB 398 ... BCMB 498 ...

Student Name: _____ UVic ID _____

Email Address: _____

Year Status: _____ Student's Signature: _____

Instructions to students: Speak with potential supervisors and work together to complete this form. Once the form is completed, student and supervisor must sign and submit the form to the departmental general office, Petch 207. These courses do not replace courses required for a Biochemistry or Microbiology program.

LEARNING OBJECTIVES:

WORK OBJECTIVES:

ANTICIPATED SCHEDULE (~78 hours per term; ~ 6 hours/week over 13 weeks):

EVALUATION (grading scheme is COM, N or F): Evaluation depends on success in achieving the learning objectives, work objectives, and meeting the work schedule that was agreed to on the application. Evaluation is due seven (7) calendar days after the end of classes for courses that do not have a final examination as noted in the calendar.

EXPECTED COMPLETION DATE: _____

Supervisor: _____ Date: _____

Signature: _____

Chair's Signature: _____ Date: _____