

**SCHOOL OF LIFE SCIENCES UNDERGRADUATE MENTORED RESEARCH/
MENTORED STUDY APPROVAL FORM**

Student Name: _____ Email: _____

NSHE ID: _____ Term: _____ Credits (1-3): _____

Date Course Will Be Completed: _____

Indicate which course approval is requested (**check one only**):

- BIOL 492:** Undergraduate Research
- BIOL 496:** Special Topics in Modern Biology

1. **PROSPECTUS:** A description of the mentored research plan is required for all BIOL 492 and BIOL 496 students. The student and research mentor must fill out this section together. Use the space below to outline the research problem and how the student will be involved in collecting and analyzing the data to advance the project (attach additional documentation if necessary):

2. **SAFETY TRAINING:** It is required that all BIOL 492 and BIOL 496 students working in a research laboratory receive proper laboratory safety training. Please check the appropriate line:

- I **HAVE NOT** yet taken a course in laboratory biosafety. Students checking this line must complete safety training and provide documentation to the SoLS Front Office prior to the semester beginning.
- I **HAVE** already completed the laboratory biosafety training program and have provided the documentation (attached to this form) so I can be granted permission to enroll. The research described above will **NOT** require working in a laboratory environment.

3. **AWARD OF CREDIT DETERMINED BY (check all that apply):**

- Experimental Data Set Literature search with bibliography Manuscript or paper
- Computer program Oral presentation Poster presentation

Student Signature: _____

Faculty Advisor (Print name): _____

Faculty Signature: _____