



University
of Windsor

BIOM 4904A/BIOM 4914A UNDERGRADUATE RESEARCH IN BIOLOGY

STUDENT PLACEMENT APPLICATION FORM

Fall / Winter / Summer _____

This application is for placement of an honours student with a faculty member who is willing to supervise the student's research. Placement will be based on mutual research interest between student and faculty member, number of students in a laboratory, and availability of funding. Once approved, STUDENTS MUST REGISTER FOR EACH SEMESTER for this formally 2-semester course through the Office of the Registrar. REGISTRATION IS PERMITTED ONLY THROUGH COMPLETION of a STUDENT PLACEMENT APPLICATION FORM (Students MUST submit a completed STUDENT PLACEMENT APPLICATION FORM along with UNOFFICIAL TRANSCRIPTS to Paula Tetreault at paulat@uwindsor.ca).

All Applicants Are Expected to Attend an Organizational/Orientation Meeting During the First Week of Classes.

A priority system will be used to place students in research laboratories. The Department may receive more requests for placement than spaces are available. Students receiving the highest priority for enrolment in BIOL 4904/BIOL4914 will be those who, in September meet the following criteria

- ARE registered in Honours Biomedical Sciences with Thesis in good standing
- AND require 10 or fewer courses to graduate at the end of Winter term
- AND have completed all other core courses required to graduate in Honours Biomedical Sciences with Thesis
- AND have at least a 70% average grade in the program major
- AND have at least a 70% average grade in the 6 core courses in Honours Biomedical Sciences listed below
- AND have completed courses and/or have lab experience that matches a lab with an available advisor and space
- AND have the highest grade point average achieved in the previous 10 courses most recently completed

STUDENT INFORMATION (Please print clearly): Program: _____

Name: _____ e-mail: _____

Student Number: _____ Telephone: _____

Total number of courses needed to graduate as of September 1: _____

Have you worked / volunteered in a professor's lab? _____ If "yes", please indicate the name(s) of the professor(s) and term(s) / year (s) worked:

Please indicate your research interests: _____

Please list the name of the professor to whom you have spoken with about doing an Honours Theses:

PROFESSOR'S NAME (PLEASE PRINT) PROFESSOR'S SIGNATURE DATE

STUDENT'S SIGNATURE DATE DATE REC'D IN OFFICE/RECIPIENT'S INITIALS

PLEASE COMPLETE THIS FORM AND RETURN TO THE DEPARTMENT OFFICE