

BIOENG 1095 APPLICATION FORM



Approved by (initial)

Date

Project Title

Project Semester

Project Credits Requested (1-6)

Note: Bioengineering students **may not** register for 3 or more credits of BIOENG 1095 before successfully completing BIOENG 1002.

STUDENT INFORMATION

Last

First

M.I.

E-mail

PeopleSoft #

Department

FACULTY MENTOR INFORMATION

Last

First

M.I.

Title

Department

School

E-mail

Campus Address

Phone

The student **is not** being paid to perform the project research.

Please provide a 400-word description of the proposed scope of work on the next page. Please include the expected hours per week that will be dedicated to the project.

STUDENT AND FACULTY MENTOR SIGNATURES

We attest that all information submitted on this application is accurate.

Student Signature

Date

Faculty Mentor Signature

Date

PROJECT/WORK DESCRIPTION

Please provide a 400-word description of the proposed scope of work. Please include the expected hours per week that will be dedicated to the project.

Enter text

Expected Hours per Week

Submit completed application to: [Undergraduate Academic Administrator](#)