

If the student is taking 399/499 for the first time, this page needs to be completed (DURING COVID-19 ONLY).

DEPARTMENT OF CHEMISTRY - Undergraduate Research Request Form

Name _____ M Number _____ Email _____

Specify Semester: _____ Year _____

Specify Class: _____ CRN _____ Hours: _____

Please list the faculty you wish to do research with. Request this individual to email the department office stating you have permission for the course.

Name of faculty

You must be enrolled in the Research Portfolio Blackboard site, have completed the Safety Training and passed the safety quiz prior to enrolling in the class. Please have the Safety Coordinator sign and date to verify you have completed this.

Student has passed quiz

Student has signed waiver

Bb records are updated

Safety Coordinator

Date

After obtaining the Safety Coordinator's signature, please review this form. All boxes/blanks must be completed. Once the department office has the above faculty's email, plus this completed form, you will be granted permission to register. The office will send you an email stating this.

Please note: If this is for summer, after completing the above form and receiving the faculty's email, final approval will be obtained from the department head before granting the permission.