


BIOL 449 – HONOURS THESIS REGISTRATION FORM FOR ISP STUDENTS

Name: _____	Student #: _____	 : _____
Academic Session: _____	E-mail: _____	Date: _____

Summary of proposed project:

Supervisor Approval:

Supervisor Name: _____	Dept. _____	Phone: _____
Supervisor Signature: _____	E-mail: _____	

Step 1: Integrated Sciences Program Approval:

Signature: _____	Date: _____
Lee Groat, Director Integrated Sciences Program (EOSC South 61)	

Step 2: Biology Program Approval:

Signature: _____	Date: _____
M. Adamson, Director of the Biology Program (Rm. 2521)	

NB: Completed form must be returned to Biology Program Office (Room 2521) prior to end of Drop/Add period.