

# Application For Biology Independent Research

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Home \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

School \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

PeopleSoft # \_\_\_\_\_

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QPA: \_\_\_\_\_

## Circle Biology courses taken on this campus:

Biology 0170/0070 (Foundations of Biology I)

Biology 1500 (Cell Biology)

Biology 0180/0080 (Foundations of Biology II)

Biology 1510 (Cell Biology Laboratory)

Biology 0350 (Conceptual Foundation of Genetics)

Biology 1535 (Sensation and Perception)

Biology 0470 (Biology of Aging)

Biology 1560 (Cell and Developmental Seminar)

Biology 0745 (Field Studies in Ecology)

Biology 1580 (Biochemistry Seminar)

Biology 1000 (Introductory Biochemistry)

Biology 1760 (Immunology)

Biology 1090 (Introduction to Biopsychology)

Biology 1810 (Macromolecular Structure)

Biology 1110/1111 (Human Ana & Phys I)

Biology 1820 (Metabolic Pathways)

Biology 1115/1116 (Human Ana & Phys II)

Biology 1830 (Biochemistry Laboratory)

Biology 1200/1210 (Vertebrate Morphology)

Biology 1850/1860 (Microbiology)

Biology 1385 (Environmental Ecology)

Biology 1870/1880 (Animal Physiology)

Biology 1480/1490 (Embryology)

Biology 1940/1950 (Molecular Biology)

List any other Biology courses that you have taken elsewhere (please state if there was a laboratory attached to the lecture course). Include a transcript of this (these) course(s).

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**Current Employment:**

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Hours worked per week: \_\_\_\_\_

**Other Activities:**

Please list organizations both on campus and off campus that you are currently involved in. If you hold an organizational position, please include your title, i.e. President - Science Club.

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Why do you want to complete an independent research project? How will it influence your career goals?

Give a brief description of the project you would like to work on. (Please see the biology website for research interests of the biology faculty.)

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\*Please submit all relevant transcripts along with your application to the faculty member you wish to serve as your mentor.

I acknowledge that the above information is true to the best of my knowledge. I understand that I will be notified by mail of my acceptance or denial two weeks prior to the start of the term.

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(Signature)

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(Date)