Biology Honours Program
Application Form

To be completed by student:

Student Name ___________________________________________ Student # V00____________________

Email __________________________________________________

Expected date of graduation (month, year) ______________________

Proposed Honours project _______________________________________

________________________________________________________________

Does this project involve the use or observation of animals?      ___Yes      ___No

If yes, does your supervisor have an approved animal use protocol (AUP) that you will be following?

___Yes      ___No        Approved animal use protocol number __________

Student Signature ____________________________________________

To be completed by Honours Research Supervisor(s):

Supervisor Name _____________________________________________

Email _______________________________________________________

Supervisor’s signature _________________________________________

NOTE: If the student’s Honours supervisor does not have a regular or adjunct appointment with the
Department of Biology, a co-supervisor from the Department is required.

Co-supervisor Name (if applicable) ________________________________

Email _______________________________________________________

Co-supervisor’s signature _______________________________________

Signature of the supervisor(s) is confirmation that you agree to
1. supervise the above student’s Honours project, and
2. ensure the student’s awareness of lab safety guidelines and required lab protocols (including
   WHMIS, use of animals, and research with human subjects).

Please submit this completed form to the Biology Honours Advisors
by July 1 of each calendar year.