

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 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).

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