**STUDENT INFORMATION:** to be completed by student.

**Student Name:**

**Student E-mail:**

**UCI or Summer Session ID Number:**

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**REQUIRED COURSE INFORMATION:** to be completed by Faculty and student.

All information must be provided accurately and in full, including units. Refer to WebSOC for previously approved titles/units.

**Department & Number:** Biological Sciences 199

**Title** (up to 19 characters): (as shown on transcript)

**Specify research area**

**Session/Units:**

- **Session 1:** ____ units
- **Session 2:** ____ units
- **10-Week Session:** ____ units

**Faculty Sponsor:**

**Faculty UCInetID:**

Please print full name

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*** Instructor Notes:**

Grade submission is done online with your UCInetID using WebGrades.

All academic correspondence will be made to your UCI e-mail account.

There is no remuneration for independent study courses

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**APPROVAL:** to be completed by Faculty and Associate Dean.

**FACULTY SPONSOR:**

(Signature)

**BIO SCI ASSOCIATE DEAN:**

Michael Leon, Associate Dean

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**INSTRUCTIONS:**

I. Student obtains this form and fills it out with instructor.

II. Students engaged in biomedical research must have an abstract and Signed Waiver & Release of Liability Form on file in the Biological Sciences Student Affairs Office.

III. Student/Faculty member submits form to the Associate Dean for approval.

IV. Student must submit this form, an enrollment form, and payment prior to Summer Session deadlines.

(Incomplete forms will not be accepted.)

**MAKE A COPY OF THIS FORM FOR YOUR RECORDS**

In order to ensure the integrity of the form and the authorizing signatures, forms with alterations such as white-outs or cross-outs will not be accepted.