

BIOS 399

INDEPENDENT RESEARCH COVER SHEET

STUDENT'S NAME: _____
(please print)

UIN: _____

TERM(S) REGISTERED FOR CREDIT: (please indicate year)

FALL _____ **SPRING** _____ **SUMMER** _____

FACULTY MEMBER: _____
(please print)

I have read the student's research paper and find it satisfactory.

FACULTY MEMBER: _____ **DATE:** _____
(signature)

This cover sheet **MUST** be completed and stapled to your BIOS 399 paper and delivered to the Department of Biological Sciences Undergraduate Academic Advising Office, 3268 SES, **NO LATER THAN 12pm** the Friday of finals week. No appointment is necessary.

RECEIVED _____ **DATE** _____
(Academic Advisor's signature)