



# LOYOLA UNIVERSITY CHICAGO

COLLEGE OF ARTS AND SCIENCES  
Department of Biology

## PERMISSION TO REGISTER: BIOLOGY 399 (E/M) - Independent Study

Directed study of a specific topic under direction of one or more faculty members. 1-3 credit hours.  
Please type or print clearly.

### To be completed by the student:

\_\_\_\_\_  
Student: First and Last Name

\_\_\_\_\_  
Student ID number

\_\_\_\_\_  
Class Status

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Academic Advisor

\_\_\_\_\_  
Phone Number

### **Course Information:**

BIOL 399

BIOL 399E (Ecology)

BIOL 399M (Molecular)

Registration Appt. Date/Time \_\_\_\_\_ Semester of Study: \_\_\_\_\_

Section Number: \_\_\_\_\_ Course Number: \_\_\_\_\_ Number of Credits: \_\_\_\_\_

Name(s) of Faculty Member(s) who will direct, supervise, and grade study:

\_\_\_\_\_  
Title of Study: \_\_\_\_\_

\_\_\_\_\_  
Objective: \_\_\_\_\_

\_\_\_\_\_  
Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### To be completed by faculty member(s) listed above.

1. Please list required academic preparation or other prerequisite experience (i.e., course work or volunteer in laboratory), if applicable.

2. Please list methods and/or criteria that will be used to evaluate the study that will provide basis for grade. Also, list any deadlines (i.e., draft paper due at midterm).

\_\_\_\_\_  
Faculty Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

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

-----  
 Approved, Chairperson's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Not Approved, Reason: \_\_\_\_\_

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_