



### 396 RESEARCH PROJECT APPROVAL FORM Instructions for completing this form

#### Supervisors

- Fill out Sections A and B. Sign where indicated in Section D.

#### Students

- Before completing this form, discuss time/work expectations with your prospective supervisor, keeping in mind that this is a 3-credit course (roughly 10 hours per week for 12 weeks). Remember that a 396 course is an elective.
- Fill out Section C and sign.
- To request departmental permission to register, take a printed copy of the form signed by you and your prospective supervisor to the relevant person in the department/unit corresponding to the course number. Do not register for a 396 course on Minerva until you have received departmental permission.

#### Designated approval authority (Chair/Director/Other designated person)

- If the project is approved, sign where indicated in Section D. Notify the student of the decision and, if approved, provide the necessary permission for registration through Minerva.

#### Section A: Supervisor information

Supervisor's name:	
Supervisor's e-mail:	
Supervisor's phone #:	
Supervisor's website:	
Supervisor's department:	

#### Section B: Project information

Course # (xxxx 396):	
Term:	
Project start date:	
Project end date:	
Project title (10 words or less)	
Project description (50-100 words):	
Prerequisites:	
<input type="checkbox"/>	One term completed at McGill + CGPA of 3.0 or higher
<input type="checkbox"/>	Permission of instructor
<input type="checkbox"/>	Other – please specify:



### Section B: Project information (continued)

Grading scheme (the final report must be worth at least 50% of final grades):					
Other project information:					
Ethics, safety, and training – supervisors are responsible for the ethics and safety compliance of undergraduate student. This project involves:					
<input type="checkbox"/>	Animal subjects	<input type="checkbox"/>	Biohazardous substances	<input type="checkbox"/>	Handling chemicals
<input type="checkbox"/>	Human subjects	<input type="checkbox"/>	Radioactive materials	<input type="checkbox"/>	Using lasers
<input type="checkbox"/>	None of the above	<input type="checkbox"/>		<input type="checkbox"/>	

### Section C: Student information

Student's name:	
Student's McGill ID#:	
Student's e-mail: (first.last@mail.mcgill.ca)	
Student's phone #:	
Student's program:	
Student's level:	

### Student's declaration

I certify that this course is with a different supervisor and on a different topic than any previous 396 course I have taken. I have not applied for another 396 course in this term.

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Student's signature

Date

### Section D: Approvals

#### Supervisor

I give my permission for the student identified above to register for this project under my supervision.

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Supervisor's signature

Date

#### Unit Chair / Director / Designate

I certify that this project conforms to departmental requirements for 396 courses.

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Name

Director's signature

Date