

CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
BIOLOGICAL SCIENCES DEPARTMENT
Application for Enrollment in Graduate Supervisory Course
(BIO 5000, 6910, 6920, 6930, 6940, 6960)

INSTRUCTIONS TO STUDENT (READ CAREFULLY BECAUSE THE PROCEDURE HAS CHANGED!)

1. Complete the top three lines of the form, but do not enter CRN and section number.
2. Discuss with the supervising professor the work to be performed and fill out the remainder of the form (below the box for CRN and section number). Note that all courses except BIO 6930 can be taken for 1, 2, or 3 units.
3. Return the completed form with your signature and the supervising professor's signature to the Biological Sciences Department Office by 12:00PM on the third day of classes.
4. On the fourth day of classes, a list of all supervisory course sections will be posted in the Biological Sciences Department Office. The course sections will be listed by course name, supervising professor, and number of units. The online course schedule will also contain all supervisory course sections. Using the list or the online course schedule, locate the section number and the course number (CRN) with the appropriate supervising professor listed as the instructor and the appropriate number of units.
5. Register for the appropriate course and section using BroncoDirect Online Registration before the end of the add/drop period. You will not be enrolled in the supervisory course unless you register with BroncoDirect.

Name _____ Bronco ID _____ E-Mail _____

Home Address _____ City _____ Phone (____) _____

Academic Quarter _____ Year _____ Course Prefix & Number _____ (E.G. BIO6910)

CRN _____ Section _____. DO NOT FILL IN THE CRN AND SECTION NUMBER. FOR OFFICE USE ONLY.

Nature of Work to be Performed (To be agreed upon by the student and supervising professor.)

Number of units _____ (NOTE: You may sign up for 1, 2, or 3 units for all courses except BIO 6930, which is 1 unit.)

I agree to carry out the work described in fulfillment of the requirements for this course.

(Signature of Student)

_____ Date _____

Information Provided by the Supervising Professor

Name _____ Extension _____

I agree to supervise this student's work as described above. At the end of the quarter I will submit a grade for the student.

(Signature of Supervising Professor)

_____ Date _____

I, the student, acknowledge that I must enroll myself in this course in order to receive credit. _____

Initial