

Request for BICH/GENE 491 Credit

Registered Course & CRN

TO BE COMPLETED BY STUDENTS WISHING TO TAKE BICH/GENE 491 CREDITS WITH TEXAS A&M FACULTY.

This form must be completed signed and returned to the undergraduate office at biobiougradadv@tamu.edu. The undergraduate advisor will register students for the hours approved over the terminal after a completed form is received. The student is solely responsible for paying tuition and fees by the appropriate deadlines.

PLEASE NOTE: Total credit hours requested below does not include the 491W. TERM (write semester and year): Course (write BICH 491 or GENE 491): Credit Hours Requested: ———— Is this for Honors credit? Student's Name: _____ Student UIN: _____ Student Phone: () -Student E-mail: ______@ tamu.edu Faculty Research Supervisor (please print): Faculty Research Supervisor's Phone: () -Department: Faculty Research Supervisor UIN: _____ Faculty Research Supervisor's E-mail: **Summary of Research Project** (use extra sheets if necessary) Faculty Research Supervisor Signature Date OFFICE USE ONLY: Advisor Date

Date Student Contacted