

**CARLETON UNIVERSITY
INSTITUTE OF BIOCHEMISTRY
BIOCHEMISTRY 4907/4908 PROJECT PROPOSAL FORM(circle one)**

Fall/Winter Session: _____ **Year:** _____

Summer Session: _____ **Year:** _____

The student and supervisor should complete this form and hand it in to the Undergraduate Administrator, Ruth Hill-Lapensee in room 209A Nesbitt Bldg., by the last Friday in September for the Fall/Winter Session and by the last Friday in June for the Summer Session. **Your supervisor or at least one co-supervisor MUST be a member of the Institute of Biochemistry.**

STUDENT NAME: _____ STUDENT NO: _____

ADDRESS: _____

PHONE NO: _____

E-MAIL ADDRESS: _____ (Students should check their Carleton Connect e-mail account regularly for course-related information)

SUPERVISOR: (print please) _____ (signature) _____

(If your Co-Supervisor is off-campus, please ensure that you complete the full contact information below:

LOCATION OF OFF-CAMPUS CO-SUPERVISOR: _____

EMAIL ADDRESS OF OFF-CAMPUS CO-SUPERVISOR: _____

TELEPHONE NUMBER OF OFF-CAMPUS CO-SUPERVISOR: _____

CO-SUPERVISOR (print please) _____ Date: _____

CO-SUPERVISOR SIGNATURE: _____

PROPOSED ADVISOR 1: _____

PROPOSED ADVISOR 2: _____

PROJECT TITLE: _____

BRIEF DESCRIPTION: attach a separate sheet please