CARLETON UNIVERSITY
DEPARTMENT OF BIOLOGY

BIOL 4907, Honours Essay _______
OR
BIOL 4908, Honours Research Thesis_______

Summer Session_____ Year________
OR
Fall/Winter Session____ Year________

It is the student’s responsibility to obtain the required signatures on this form and to hand it in to the Undergraduate Administrator Ruth Hill-Lapensee, room 209A Nesbitt Bldg, three (3) business days prior to the last day of registration if you are registering for the summer term or if you are registering for the Fall/Winter term.

Notice of Collection
The personal information requested on this form is collected in accordance with Sections 38(2) and 41(1) of the Freedom of Information and Protection of Privacy Act (FIPPA), R.S.O. 1990 c.F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides express written consent. Should you have any questions concerning your personal information please contact Laura Thomas, FIPPA Representative for the Department of Biology & Biochemistry, 208 Nesbitt Building, Carleton University, 1125 Colonel By Drive, Ottawa, ON K1S 5B6, Tel: 613-520-3892.

Your supervisor or at least one co-supervisor MUST be a member of the Department of Biology

Student’s name:___________________________ Student number:_______________

Connect email address:_________________________ phone:________________________

Carleton Connect e-mail account is used regularly for contact

Supervisor (print)____________________ Signature:________________ Date:__________

If you have an off-campus Supervisor please complete the information below:

(if applicable)
Location of Off-Campus Supervisor:________________________

Email Address of Off-Campus Supervisor:________________________

Telephone Number of Off-Campus Supervisor:________________________

Co-supervisor((print)_________________________ (if any)

Co-supervisor’s signature:____________________ Date:______________

Proposed advisor #1 name:(print)________________________

Proposed advisor #2 name: (print)________________________

Brief Description including Topic: (attach a separate sheet if necessary)
____________________________________________________________________________
____________________________________________________________________________
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