## Sign-In Questionnaire for BIOM\*4510 & BIOM\*4521/2

## **Research in Biomedical Sciences Project Students**

This sign-in questionnaire, for research project courses, must be completed (including the signature of the project supervisor) **before** a course waiver form will be signed. Instructor consent is required for course registration. Once signed, please return this form to either Dr. Jim Petrik or Kim Best to be signed into the course.

A detailed course description will be discussed at the formal Orientation session for registered students. It's scheduled on the first day of classes each semester. (See the D2L 'calender' for date/time/location).

Students doing an experimental project with a supervisor in the Department of Biomedical Sciences <u>must</u> have WHMIS training approved by the course coordinator. Students with projects in other Departments should follow his/her supervisor's instructions regarding WHMIS training.

This section to be filled in by student (please print):

Name	:	<b>I.D</b> .# :		
Major	/Area of Specialization :	_		
Do you	have the required prerequisite of 14.00 credits?:	Yes No		
Semes	ter course will be taken: Summer Fall Winto	Year: 20		
Course	e options : BIOM*4510 BIOM*4521/2			
Your p	hone number in Guelph: Hon	ne:		
UoG E	-Mail:			
This so	ection to be filled in by supervisor:			
1)	Does the proposed project involved the use of animal or human subjects?		Y	N
2)	If yes, has the necessary ethical approval been obtained?		Y	N
3)	If ethical approval is not yet in place, please describe contingency plans for the student's project should the required approval not be obtained in time for the planned experiments:			
Name	: Dept. :	Signature :		
Email:				

Return this form to either: Dr. Jim Petrik - Rm 3627, OVC (jpetrik@uoguelph.ca) or Kim Best - Rm 2631, OVC (kbestb@uoguelph.ca)