

**Sign In Questionnaire for NEUR\*4450 & NEUR\*4401/2**  
**Research in Neurosciences**

This sign-in questionnaire for research project students 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. To have a waiver signed, you must bring this form back to Kim Best.

A detailed course description will be discussed at the formal Orientation Session for registered students. Students doing an experimental project with a supervisor in the Department of Biomedical Sciences must have WHMIS training approved by the course coordinator. Students with projects in other departments should follow his/her supervisor's instruction regarding WHMIS training.

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**This section to be filled in by student:**

Name: \_\_\_\_\_ I.D.#: \_\_\_\_\_

Major/Area of Specialization \_\_\_\_\_ Course: Required or Elective

Do you have the required prerequisite of 14.00 credits? Yes \_\_\_\_ No \_\_\_\_

Semester course will be taken: **Summer** **Fall** **Winter** 20\_\_

Course Options: **NEUR\*4450 EP** **NEUR\*4401/2 EP**

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**This section to be filled in by supervisor:**

1. Does the proposed project involve 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: \_\_\_\_\_ Department: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this form to: **Kim Best, Room 2633, OVC** ([kbestb@uoguelph.ca](mailto:kbestb@uoguelph.ca)) and she will fill in and sign a course waiver so you can register for the course.