

School of Molecular and Cellular Biology Instructional Program
MCB 290 Credit Request Form
Undergraduate Research in MCB Laboratory
Fall and Spring Form (Use alternate form for Summer)

The purpose of this document is to affirm that both the enrolled student and the research advisor (MCB faculty member or MCB affiliate) understand and agree to the standards for student enrollment in MCB 290. Any questions should be directed to the MCB Core Curriculum Office in 252 Davenport Hall; 217.244.6239. Please return completed form to the MCB Core Curriculum Office to obtain the appropriate CRN for registration. **Registration for MCB 290 should be completed by the university deadline for undergraduates to add a full semester course, which is generally the 10th day of class during the fall and spring semesters and the 7th day of class during summer session II.**

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Student's Name: _____ Preferred Email: _____

Student UIN (9-Digit UIUC ID#): _____ Network ID: _____

College: _____ Current Major: _____

Class Standing (Fr, So, Jr, Sr): _____ Phone: _____

I understand that I cannot receive monetary payment, or any other type of compensation, for the portion of work for which I am earning course credit. I further certify that I have read and understand all of the information and policies stated on the MCB Undergraduate Research Web site at <http://mcb.illinois.edu/undergrad/research.html>.

Student's Signature: _____ Date: _____

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For which term and year are you seeking course credit (i.e. FA16 or SP17)? _____

Indicate the number of CREDIT HOURS you intend to sign up for. During fall and spring semesters students are expected to work 5 hrs/week over 16 weeks for 1 credit hour.

Credit Hours Requested (1 credit hour ~ 5 hours/wk in lab) _____

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Faculty Research Advisor's Name (please print legibly): _____

Faculty Advisor's Signature: _____ Date: _____

Faculty Advisor's College: _____ Faculty Advisor's Department: _____

Faculty Advisor's Email: _____ Office Phone: _____

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Term (e.g. FA 16, SP 17, SU 17): _____

Section: _____ CRN: _____

Student will enter the CRN at the bottom of the Add/Drop Page in the Enterprise Self-Service Registration System by the university deadline. It will default to one credit hour. Click on hyperlink to change as needed.

MCB Signature: _____ Processing Date: _____