

Intro to Biological Research (BIO 4012) – CAPSTONE CONTRACT FORM

*****This contract should be completed by the student and the course instructor (Dr. Chris Butler) and taken to the Capstone Coordinator (Dr. Paul Olson) before permission will be given to enroll in BIO 4840 Capstone. As a student, you will enroll in *BIO 4012* for a capstone experience and also enroll in *BIO 4840* to receive credit for the capstone experience.**

Student Name: _____

Student ID Number: _____

Student Email: _____

Student Telephone #: _____

Course Name: **Intro to Biological Research**

Course Number: **BIO 4012**

Professor: Dr. Chris Butler

Email: cbutler11@uco.edu

Telephone: 405-9745782

Year: _____

Semester: _____

Description of the Capstone Experience

Student's Responsibilities/tasks:

1. Attend and actively participate each week in class
2. Submit writing assignments pertaining to weekly lectures, readings, and discussions
3. Submit reflective writing piece – **Capstone Requirement**

I understand that in addition to enrolling in BIO 4012, Intro to Biological Research, I must **ALSO** enroll in BIO 4840, Capstone.

I understand that in addition to the assignments in BIO 4012, I must submit the reflective writing piece by the deadline.

Signature of Professor: _____

Date: _____

Signature of Student: _____

Date: _____

Do not write below this line – limited to Capstone Coordinator

Verified if any DSS required and if in place – Needed Y___ N___ Date: _____

International Student – CPT for signed Y___ N___ Date: _____

INSTRUCTOR PERMISSION TOP ENROLL IN BIOLOGY CAPSTONE COURSE 4840

Steps in obtaining permission to enroll (student):

1. Complete the Capstone Contract Form
2. Complete the below portion of this form
3. Turn in both completed forms to the Dept. of Biology (Howell Hall, room 200)

The following student has instructor permission to enroll in:

Biology Capstone course 4840, CRN#: _____ Year: _____ Semester: _____

Student Classification (circle): Freshman Sophomore Junior Senior

Student ID #: _____ Student Name: _____

UCO Email: _____ Phone #: _____

Capstone Coordinator: _____ Date: _____