BIOL 3900____ BIOL 3900H___ FACULTY/STUDENT READING COURSE AGREEMENT FORM*

PLEASE PRINT!

Date ________________________________Semester/Year Course Taken_________________

Student Name ________________________Student 81#______________________________

Student Email _________________________Student Phone Number ___________________

Student Major _________________________________________________________________

Faculty Sponsor _____________________________Sponsor’s Department _________________

Credit Hours to be earned in BIOL 3900__________________
Credit Hours to be earned in BIOL 3900H__________________

Faculty will provide us with a statement of the work required of the student for the number of hours to be earned. The readings for this course should be relevant in nature to the Biological Sciences.

______________________________________________________________________________

Student Signature __________________________________________________________________
Faculty Sponsor Signature __________________________________________________________________

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Dr. Kristen Miller (Director)

*The Faculty/Student Reading Course Agreement must be submitted to Room 411 Biological Sciences no later than 5:00 pm on the business day PRIOR to the first day of class of intended enrollment to obtain permission to register.

Revised Fall 2016

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