Undergraduate Research Contract – Biology majors

Off-campus Research (updated 8/2022) - PLEASE SUBMIT BEFORE CLASSES BEGIN

| Student name: | Class year: | |
|--|--|--|
| Eagle ID Number: | Major: | |
| Principal Investigator: | Research Location: | |
| Semester: Fall Spring Contract form must be submitted y | for each semester of Undergraduate Research | |
| To be filled out by the Principal Investigator | | |
| The work of the student in my laboratory will pertain primarily to: | (You may check more than one if applicable) | |
| ☐ Cell & Developmental ☐ Genetics ☐ Microbiology ☐ Biology | Physiology and Bioinformatics/ Other Computational Biology | |
| 2. Please briefly describe the nature of the work in your lab, and explain if you checked "other" above. | | |
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| 3. If there is someone in the lab who plays a major role in the day-to-day mentoring and supervision of the student, please provide his or her name and contact information: | | |
| Name: Ema | iil: | |
| Position (grad student/postdoc/research assoc./fellow): | | |
| | | |
| 4. Please list the requirements and expectations of the student for the semester (e.g., # hours per week spent in the lab, attendance at group meetings, presentation/report, etc.). The department requires a commitment of at least 10 h/week . | | |
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| 5. How often will the mentor and/or PI meet with the student during the semester? | | |
| 6. How will the student's work be evaluated for the determination of a course grade? | | |
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7. Please sign at the end of this agreement and submit a brief evaluation and grade at the end of the semester to Dr. Ben Fofana

at fofanai@bc.edu.

To be filled out by the student

| Please briefly describe the work you will undertake this semeste use. | er, including the key experimental goal(s) and method(s) you will |
|---|---|
| For continuing students only: Please briefly describe what was | accomplished in the previous semester. |
| Please indicate your agreement to the following condition a. At the end of the semester, I am responsible for remining grade, by email, to the instructor of record (Ben Fofana, for b. I agree to the requirements and expectations described c. I acknowledge that the work for course credit cannot be d. I acknowledge that two semesters of UG research for course credits toward the electives or the advanced expensions. | ding my research adviser to submit an evaluation and ofanai@bc.edu). If by the principal investigator, we part of paid employment, are dit in the same laboratory must be completed in order perience requirement of the biology major. Student Initials |
| Signat | ures — — — — — — — — — — — — — — — — — — — |
| Student | Date |
| Principal Investigator | Date |
| Professor Ben Fofana | Date |

Please submit this completed and signed form to Sile Ni Scanlain in Higgins 355E before the first day of classes for the semester to which this contract applies.