Student is responsible for all fees and tuition incurred for adding this 291. Fee statements may have already been sent out by the time this class is added. **No New Fee** Statements will be sent. Any fees and/or tuition that are not paid by the first day of class will result in <u>all</u> registered courses being dropped.

Biomedical Science

291 Problems Course Coordination Sheet – NON CVM RESEARCH
You will be registered for this class by the BIMS Office by the end of December. Please complete the Lab Safety Agreement on Howdy before the end of the semester so we can put you in the 291 class. You may not register yourself!

Student Name:

Major:	Classification:						
UIN:	Local Phone:						
Local Address:							
E-Mail:					_		
Semester: FallSprin		mmer I	Summer	· II	10 Week		
Please provide a brief descriptio	n of the Probler	ns course that y	ou will be	working o	on during th	e semester:	
Professor Offering Course:							
Course Information: Department(Example: BIMS 291-513 for 3 sem	291.	Section Number:	:	_Hrs:		S/Uecked before student	
CANNO	OT BE CHAI	NGED AFTE	R 4 th CL	ASS DA	will be reg	gistered)	
Approved/Faculty Member:	Signature				Date		
A	C						
Approved/Department Head: (CVM 291 ONLY) Signature				Date			
For Office Use Only: Degree Audit Approval:							
	Signat	ture(Biomedical	Science)				
Verified on Compass-form SZAREO		Date:		Initials:	CR	N:	