



uOttawa

Université d'Ottawa | University of Ottawa

Faculté des sciences | Faculty of Science

Bureau des études de premier cycle | Undergraduate Studies Office

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Registration Form for the Research Project and Seminar (2021-2022)

Department of Biology

Instructions: For biology and biomed students, please select your research project by checking the appropriate box below. For biology students, please register to your seminar on-line with the enroll tool. For biomed students, registration for the seminar will be done manually by the office of undergraduate studies based on your selection below and availability.

Project:

BIM4009 (9 un.) Fall and Winter

Minimum CGPA : 6.0 or Minimum GPA: 6.0 (last 54 completed units)

BIO4009 (9 un.) Fall and Winter

Minimum CGPA : 6.0

BIM4006* (6 un.) Fall or Winter

Minimum CGPA : 6.0 or Minimum GPA: 6.0 (last 54 completed units)

*Any enrollment to [BIM 4006](#) must be approved by the Director of the BIM program

BIO4004 (3 un.) Fall and Winter

Minimum CGPA : 4.5

Honours Research Project Title: _____

Biomed Seminar: BIM4920 (Fall) and BIM4921 (Winter)*

*** Students must select the same section for both terms**

- A. Neurosciences
- B. General topics
- C. General topics
- D. Human Toxicology
- E. General topics (bilingual)*

1st choice: _____ 2nd choice: _____

*Language of instruction is in French but you may present in either French or English.

Student surname: _____ Given name: _____

Student number: _____ Student uOttawa email: _____

Program of study: _____

Student's signature: _____ Date: _____

For Supervisor use (for project approval):

Name of Supervisor: _____ Signature*: _____

Supervisor's email: _____

***Reminder for project supervisors:** I agree to: (1) evaluate and provide a grade for this student's thesis plus that of another student (total of two theses per student supervised), and (2) attend the annual poster session in the spring, where I will evaluate and provide grades for about two posters per student supervised.

For Faculty use

CGPA/GPA: _____

Signature (Advisor): _____ Date: _____