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| Department of Biological Science*Charles E. Schmidt College of Science* | Phd Registration Form | FAUMark |

**Please Print**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STUDENT Number Z\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAU email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@fau.edu Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRIMARY CAMPUS (indicate one): Boca )\_\_\_\_\_\_\_\_Davie)\_\_\_\_\_\_\_ Jupiter)\_\_\_\_\_\_\_Harbor Branch)\_\_\_\_\_\_PSL)\_\_\_\_\_\_\_

**SEMESTER:** Please check semester and course section:

FALL)\_\_\_\_\_\_\_\_\_\_\_Spring) *\_\_\_\_\_*\_\_\_Summer: 1 (c)\_\_\_\_\_\_\_2(a)\_\_\_\_\_\_\_3 (b)\_\_\_\_\_\_\_\_

**COURSE SECTION**:

 BSC 7978 Advance Research in Integrative Biology CRN#\_\_\_\_\_\_\_\_\_ Total credits\_\_\_\_\_\_\_

 BSC 7980 Dissertation CRN#\_\_\_\_\_\_\_\_\_ Total Credits\_\_\_\_\_\_\_

 Course Title CRN# Total Credits

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**SUPERVISOR** (Please print name of faculty member) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF FACULTY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student notified on: \_\_\_/\_\_\_/\_\_\_by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Notification by: E-Mail Phone in person. Revised: 08/27/13