Student is responsible for all fees and tuition incurred for adding this 285. 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 all registered courses being dropped.

Biomedical Science
285 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 285 class.
You may not register yourself!

Student Name: ____________________________

Major: ____________________ Classification: ____________________

UIN: __________________________ Local Phone: __________________________

Local Address: __________________________

E-Mail: __________________________

Semester: Fall____ Spring____ Summer I ______ Summer II ______ 10 Week ______
Year: __________________________

Please provide a brief description of the Problems course that you will be working on during the semester:

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Professor Offering Course: __________________________

Course Information: Department__________ 285. Section Number:__________ Hrs:______ Grade______ S/U______
(Example: VIBS 285-513 for 3 semester hrs.)

CANNOT BE CHANGED AFTER 4th CLASS DAY

Approved/Faculty Member:
Signature ____________________ Date: ____________________

Approved/Department Head:
(CVM 285 ONLY) Signature ____________________ Date: ____________________

For Office Use Only:
Degree Audit Approval: ____________________

Verified on Compass-form SZAREGS ________ Date: ____________ Initials: ________ CRN: ____________

Signature(Biomedical Science)