SCIE3250 APPLICATION FORM FOR SEMESTER 1 2020

Please submit this form by email to smp.student@uq.edu.au or to the School Student Administration staff, School of Mathematics and Physics office, Room 202, Level 2 Physics annexe, (#06).

Student’s Name: .................................................. UQ Student Number: .............................................

NOTE: The information supplied on this form is for School administrative use only, and does not replace the University enrolment procedures. You will receive an email granting permission for you to enrol. You then must add the course via my SI-net.

Discipline(s) where project will be carried out: .............................................................................................................

Name of Principal Supervisor: .................................................................................................................................

Title of Project: ...............................................................................................................................................................

(You must contact a staff member and obtain their agreement before you submit this form.)

Project suggestions are available from the Research section on the School website. Students interested in projects or course areas should consult with the relevant person to discuss a suitable project.

The supervisor must have read the ECP and be aware of the assessment criteria and marking.

Signatures: Please ensure signatures are obtained before submission.

Signature of Primary Supervisor: ........................................... Date: ...............................................

Signature of Student: ................................................................. Date: ...............................................

Completed applications signed by the staff member who has agreed to supervise you, should be submitted to the School of Mathematics and Physics Student Administration staff on or before Friday 7 February 2020.

OFFICE USE ONLY

Approval of Course Coordinator: ........................................... Date: ...............................................

Approval of Head of School: .......................................................... Date: ...............................................

Added to spreadsheet: .................................................................