



BBS Educational Programs Office Health Science Centre, Room 4H30, 1280 Main Street West Hamilton, Ontario, L8S 4K1

(905) 525-9140, Ext. 22059bbsug@mcmaster.ca⊕ healthsci.mcmaster.ca/biochem

Permission Form: BIOCHEM 3A03 & BIOCHEM 3R06

Using this form:

Please fill out this form after you have found a supervisor and have it signed. Signed forms are to be returned to bbsug@mcmaster.ca.

** IMPORTANT – If the principal investigator is not a part of the Department of Biochemistry and Biomedical Sciences, you must first inquire to bbsug@mcmaster.ca for approval. You may be required to complete a Research Project Approval Request form prior to the project being approved.

Student Information	
Date:	
Student Name:	
Student Number:	
McMaster Email Address:	
Current Program:	
Course for which you are requesting enrollment p	permission:
BIOCHEM 3A03 - Fall	
BIOCHEM 3A03 - Winter	BIOCHEM 3R06 - Fall/Winter
BIOCHEM 3A03 - Spring	BIOCHEM 3R06 - Spring/Summer
BIOCHEM 3A03 - Summer	
Supervisor Information	
Supervisor:	
Department:	
Email Address:	
Signature:	