

Permission Form for BIOCHEM and BIOMEDDC Senior Thesis Courses

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 bcthesis@mcmaster.ca.

**** IMPORTANT –** If the principal investigator is not member of the Department of Biochemistry and Biomedical Sciences, you must first inquire to bcthesis@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:

Honours Biochemistry

Honours Biochemistry - Biomedical Research Specialization

Honours Biochemistry - Biomedical Research Specialization Co-op

Biomedical Discovery and Commercialization

Course for which you are requesting enrollment permission:

BIOCHEM 4Z03

BIOMEDDC 4A15

BIOCHEM 4F09

BIOCHEM 4T15

Supervisor Information

Supervisor: _____

Department: _____

Email Address: _____

Signature:
