Department of Geology & Geophysics
APPLICATION FOR UNDERGRADUATE RESEARCH
GEOL 3909

NOTE: A separate application needs to be filled out for each semester enrolled

REQUEST DATE:

STUDENT INFORMATION

NAME: ___________________________ LSU ID NUMBER: ___________________________

MAJOR(S): ___________________________ LSU GPA: ___________________________

MINOR(S): ___________________________ OVERALL GPA: ___________________________

LOCAL PHONE #: ___________________________ 

CELL #: ___________________________

EMAIL: ___________________________

COURSE REQUEST

SEMESTER (FALL, SPRING, SUMMER): ___________________________ YEAR: ___________________________

COURSE: GEOL 3909 CREDIT HOURS: ___________________________

NOTE: GEOL 3909, may be taken for up to 9 credits; variable credits; pre-requisite for GEOL 3999

BACKGROUND

COURSEWORK PERTINENT TO RESEARCH AREA:

PRIOR RESEARCH EXPERIENCE:

INTERNSHIPS:

OTHER:

CONTRACT SIGNATURES:

STUDENT NAME (PRINT): ____________________________________________

STUDENT SIGNATURE: ___________________________ DATE: ___________________________

PROFESSOR NAME (PRINT): ____________________________________________

PROFESSOR SIGNATURE: ___________________________ DATE: ___________________________
By signing below, I agree that this student has met all requirements to enroll in this course, and therefore, is able to participate in the research acknowledged above.

_________________________________________  DATE: ________________________________

Signature of Undergraduate Advisor or Chair