

IB 99/199 RESEARCH

Department of Integrative Biology



Application for IB 99/199: Supervised Undergraduate Research

IB 99/199: Supervised Undergraduate Research is intended for undergraduates involved in a research lab.

INSTRUCTIONS: Complete application and **research summary**, then return to IB Undergraduate Student Services Office (USSO, 3060 VLSB) to receive the CCN. *The deadline is Friday of the 5th week of classes.*

CREDIT: The course is graded Pass/Not Pass. The student may earn 1-4 units of credit (1 unit = 3 hours/wk). Credit for IB 99/199 may not be applied towards IB upper division elective units. The student may repeat this course, but no more than 16 units of 98, 99, 197, 198, or 199 credit may be applied to the degree.

ELIGIBILITY for IB 99:

- ⇒ Have fewer than 60 units (including AP credit)
- ⇒ Have at least a **3.4 GPA** overall

ELIGIBILITY for IB 199:

- ⇒ Have at least 60 units (including AP credit)
- ⇒ Have at least a **2.0 GPA** overall

SPONSORSHIP of IB 99/199: The IB 99/199 courses must be sponsored by a UCB faculty member, but the research may be in any biology lab.

Semester: _____ **IB 99** or **IB 199** (please circle)

Print Name: _____ **SID#:** _____

Print PI Name: _____

Print UCB Faculty Sponsor Name (if non-UCB lab): _____

Units (1-4): _____

Status: Freshman _____ Sophomore _____ Junior _____ Senior _____

*Students must have at least 60 total units (including AP credit) on their transcript to have junior standing.

Student Email Address: _____ **Student Phone:** _____

SUMMARY OF RESEARCH: Please attach a half-page (double-spaced) description of your project (if applicable) and your responsibilities while working in the lab.

Student's Signature: _____

By signing, I recognize that I must complete the lab responsibilities.

PI Signature: _____ **PI Email:** _____

By signing, I recognize that this student will receive 1-4 units of Pass/No Pass credit for IB 99/199 research in my laboratory.

UCB Faculty Sponsor (non-UCB labs): _____ **Sponsor Email:** _____

By signing, I agree to sponsor this student pursuing 1-4 units of IB 99/199 credit in non-UCB lab. I agree to record the final Pass/No Pass grade in consultation with the PI.

For Departmental Use:

IB GPA: _____ CCN: _____ SECTION #: _____

TOTAL UCB EARNED UNITS: _____ STAFF INITIALS: _____ DATE: _____