**PART 1 (STUDENT INFORMATION)**

<table>
<thead>
<tr>
<th>Student Name (Last, First, MI)</th>
<th>Rensselaer ID Number</th>
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<table>
<thead>
<tr>
<th>Date:</th>
<th>Term/Year: (check one and indicate the year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fall ☐ Spring ☐ Summer ☐</td>
</tr>
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<table>
<thead>
<tr>
<th>School Email Address:</th>
<th>Phone:</th>
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</table>

**PART 2 URP (UNDERGRADUATE RESEARCH PROGRAM)**

<table>
<thead>
<tr>
<th>Subject Code (e.g.) COMM, MATH:</th>
<th>Circle one:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2000 level (2941) 4000 level (4941)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transcript Course Title: Maximum of 30 characters including spaces and punctuation</th>
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**PART 3 LAB SAFETY TRAINING (PLEASE ANSWER ALL QUESTIONS)**

1) Conducting research in an experimental lab? Circle: YES NO
2) Completed lab safety training? Circle: YES Indicate most recent month/year training was completed ________________

Circle: NO Indicate when training will be completed ________________

*PLEASE NOTE: Lab safety training is required BEFORE you begin to work in an electrical, biological, chemical, or radiation laboratory. Additional training requirements may be identified and required. Check with your instructor if you have questions.*

**PART 4 SCHOOL OF SCIENCE RESEARCH REGISTRATION**

Check the appropriate course number and indicate credit hours

- ☐ BIOL 2900 Research in Biology ______ cr. hr.
- ☐ BCBP 2900 Research in BCBP ______ cr. hr.
- ☐ BIOL 2930 Out of the Classroom Experience in Biology ______ cr. hr.
- ☐ BCBP 2930 Out of the Classroom Experience in Biochem/Biophysics ______ cr. hr.
- ☐ BIOL 4900 Team Research ______ cr. hr.
- ☐ BIOL 4970 Non Thesis Research ______ cr. hr.
- ☐ BCBP 4970 Non Thesis Research ______ cr. hr.
- ☐ BIOL 4990 Senior Research Thesis ______ cr. hr.
- ☐ BCBP 4990 Senior Research Thesis ______ cr. hr.
- ☐ CHEM 2930 Out of the Classroom Experience ______ cr. hr.
- ☐ CHEM 2950 Undergraduate Research ______ cr. hr.
- ☐ CHEM 4970 Advanced Research (Chemistry junior or seniors only) ______ cr. hr.
- ☐ ERTH 4970 Out of the Classroom Experience ______ cr. hr.

Optional Transcript Title: Maximum of 30 characters including spaces and punctuation:

**PART 5 (TO BE COMPLETED BY THE INSTRUCTOR): DESCRIPTION AND GOAL OF THE PROPOSED RESEARCH, INCLUDE INFORMATION ON THE SPECIFIC ROLE OF THE STUDENT**

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*Students admitted to the accelerated BS/PHD program in Science only.*

Check if this registration is one of your required Research Rotations ________
EXPECTATIONS, ASSIGNMENTS AND OUTCOMES: (WRITTEN REPORT OR ORAL PRESENTATION OF RESULTS?)
ADDITIONAL ASSIGNMENTS: INDICATE EXPECTED WEEKLY TIME COMMITMENTS

EVALUATION CRITERIA: ON WHAT SPECIFIC RESULTS AND/OR PRESENTATIONS WILL THE STUDENT BE GRADED? HOW IS THE GRADE DETERMINED?

(TO BE COMPLETED BY THE INSTRUCTOR)

Print Instructor’s Name: ____________________________

Instructor’s Signature: ____________________________ Date: ____________________________

PART 6 (TO BE COMPLETED BY THE DEPARTMENT HEAD)

I have reviewed the completed URP/Research proposal and approve.

Print Department Head or Designee’s Name: ____________________________

Department Head or Designee’s Signature: ____________________________ Date: ____________________________

PART 7 (TO BE COMPLETED BY THE ADVISER)

Adviser approval is needed only when the student is working on more than 1 URP per term. Only one URP for credit hours is allowed per term.

Adviser’s signature: ____________________________ Date: ____________________________

URP Instructions

STUDENT: Fill in Part 1, 2 & 3. The URP instructor/researcher should complete Part 5. Obtain the approval of the Instructor’s Department Head or designee, Part 6. If you are registering for more than one Undergraduate Research Project in a single term, you must obtain the signature (approval) of your adviser, Part 7. Only one URP for academic credit is allowed per term. After obtaining the necessary signatures submit this form to the Registrar’s Office by the end of the 2nd week of class, the Add Deadline.

INSTRUCTOR: If you agree to work with the student on an Undergraduate Research Project (URP), complete Part 5. Return the form to the student who must obtain the approval signature of your Department Head or Designee.

DEPARTMENT HEAD: Review and sign Part 6. Sign the document and keep a copy. Return original to student to be submitted to the Registrar’s Office by the end of the second week of class.

ADVISER: Students participating in more than one Undergraduate Research Project must have adviser approval. Sign and date, Part 7. Students are allowed to register for only one URP for academic credit per term.

School of Science Research Registration Instructions

STUDENT: Fill in Part 1 & 3. Determine with your instructor the appropriate registration course number in Part 4. The instructor will complete Part 5. Accelerated BS/PhD students should indicate if the research is one of the required Research Rotations. After obtaining the necessary signatures submit this form to the Registrar’s Office by the end of the 2nd week of class, the Add Deadline.

INSTRUCTOR: Complete and sign Part 5