

DEPARTMENT OF HUMAN PHYSIOLOGY



REQUEST FOR INDIVIDUALIZED STUDY

Fill out the form and send to supervisor for signature, then email completed form to asibul@uoregon.edu
Deadline to submit is 4pm on the last weekday before each term's registration deadline.

STUDENT INFORMATION:

NAME: _____

UO ID: _____

EMAIL: _____

DATE: _____

TERM: Fall ___ Winter ___ Spring ___ Summer ___

	<u>CRN (from class schedule)</u>	How many credits do you intend to register for?
HPHY401 Research	_____	1
HPHY403 Thesis	_____	2
HPHY404 Internship	_____	3
HPHY406 LA Practicum	_____	4

You must register on Duckweb using this CRN after being approved

3 hours per week = 1 credit hour (1 credit per 30 hours per term); to register for more than 1 credit use "change variable credits link" in duckweb after registration

Your supervisor or the course instructor will have you keep a time log, establish learning objectives, and submit a reflection of your experiences

SUPERVISOR/P.I. INFORMATION:

NAME: _____

UO ID (if applicable): _____

SITE/FACILITY: _____

EMAIL ADDRESS: _____

STUDENT DUTIES:

SUPERVISOR SIGNATURE: _____ DATE: _____