Department of Human Health and Nutritional Sciences

HK*4230 Advanced Study in Human Biology and Nutritional Sciences HK*4360 Research in Human Biology and Nutritional Sciences HK*43712 Research in Human Biology and Nutritional Sciences

This form must be completed **<u>prior</u>** to requesting a signature on the course waiver form (*instructor consent is required for registration in any of the above listed courses*).

Detailed course descriptions can be found on our departmental website at: http://www.uoguelph.ca/hbns/undergraduate.shtml

TO BE COMPLETED BY STUDENT:			
Name:	ID #:		
U of G Email address:			
Major: Current Seme	ester:		
Signature:			
Do you have the required prerequisite of 12.00 cre	dits?	Yes	No
Semester and Year course will be taken:	Spring Fall	Winter	20
Intended course: HK*4230 (Lit Rev) HK*4360 (F	Research Project)	HK*43712 (Res	earch Project)
TO BE COMPLETED BY FACULTY ADVISOR:			
Is the proposed lit review/project relevant to the ge Indicate which of the following 5 areas most closely			No
Nutrition / nutraceutical sciences / nutrigenomics Exercise Physiology / Performance Biomedical		/ metabolism / g cal / neural / mo	
For Research Projects Only:			
Does this project involve actual hands-on experien	ce in a lab, field or o	ther research er Yes	nvironment? No
Does this project involve <u>only</u> the analyses of data Does the proposed project involve the use of animal If yes, has the necessary ethical approval been, or	al or human subjects	Yes ? Yes Yes	No No No
If ethical approval is not yet in place, is there a defa		ent's proiect sho	ould the
required approval not be obtained in time for plann		Yes	No
Name:	Dept.:		_
Signature:			

Please return this form to Dr. David Dyck, Rm. 345, Animal Science/Nutrition Bldg.

**** remember to bring a course waiver form with you, for signature ****

(available at Registrarial Services 3rd floor UC, or online)