DEPARTMENT OF INTEGRATIVE BIOLOGY
APPLICATION FORM – Arctic Ecology – BIOL*4610
(Please return application form, deposit and course waiver form to Connie Davison, Room 2484, Science Complex, no later than Friday, January 26th, 2018)

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<tr>
<th>Name:</th>
<th>Program and number of semesters left to complete program (as of May 2017):</th>
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<th>Guelph Address:</th>
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<th>Student I.D. Number:</th>
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<th>Home Address (during summer 2017):</th>
<th>Home Telephone Number:</th>
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A. Academic Background

1. Cumulative Grade Point Average:___________________

By May 2017, I will have taken the following courses or equivalent (list course #s).

2. Core Biology Courses:_____________________________________________

3. Ecology:__________________________________________________________

4. Invertebrate Zoology:_____________________________________________

5. Statistics:________________________________________________________

A DEPOSIT OF $350.00 MUST ACCOMPANY YOUR APPLICATION. Cheque is payable to the University of Guelph. You must also hand in a signed Course Waiver form so we can register you in the course. [http://www.uoguelph.ca/registrar/undergraduate/files/course_waiver_request.pdf](http://www.uoguelph.ca/registrar/undergraduate/files/course_waiver_request.pdf) Deposit will only be refunded if you are not accepted into the course.
B. General Background (Please write no more than 3 sentences for each section)

1. Career Goals

2. Past Field Experience

3. Past Research Experience

4. Any other points you would like to raise.
OTHER INFORMATION
This information is being collected to assist in organizing accommodation, meals and to better support you in the field. This information will not be used to exclude students from participation in the course. In providing this information you consent to have it disclosed to the relevant instructors and support staff for your field course.

Please indicate your gender: FEMALE ____ MALE ____
(The course welcomes individuals of all genders. Your selection is used only for accommodation assignment. At the Churchill Northern Studies Centre, accommodation is generally 4 to a room, with 2 sets of bunk beds per room.)

Please indicate any dietary restrictions you may have: ________________________________
________________________________________________________

Please indicate any allergies (including to foods or insect bites/stings) or drug sensitivities you may have: ________________________________
________________________________________________________

Do you carry an epipen? Select: YES ____ NO ____

We will be working in various field environments, including uneven and slippery rocky coastlines and in soft and uneven bog and tundra environments. Weather permitting, we will be in the field for full work days (7-8 hours/day), with a break for lunch. Weather permitting, we may go for a kayaking excursion or other eco-tour of approximately 2.5 hours. Many days, we will also have evening presentations/discussions and lab work, including sorting specimens and data basing of field data, until approximately 9 PM. Please indicate any illnesses, physical limitations, and/or disabilities that may affect your participation in such field work, general outdoor activities, and lab/computer work. (You may attach an additional sheet if needed.) ________________________________
________________________________________________________

Contact person in case of emergency
Last Name_________ First Name_________ Relationship______________
Address ________________________________________________________
PHONE: Daytime ___________ Evening ___________ Cell ________________