

Student Name: \_\_\_\_\_ Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_ Degree Program: \_\_\_\_\_

*Enrollment in BTNY 698/699 entails an expectation of reasonable progress in scholarly research. These expectations include:*

- i) conducting independent research on the background, motivation, and prior work related to the primary subject of the research project,*
- ii) actively participating in research at a level consistent with a professional research position,*
- iii) contributing to overall operations,*
- iv) following all safety guidelines and expectations associated with the research environment,*
- v) following ethical research practices,*
- vi) contributing to the written and oral dissemination of research findings, and*
- vii) meeting the specific expectations for this semester documented below*

***By registering for research credits, the student acknowledges agreement with the expectations set forth by the faculty member.***

***By allowing the student to sign up for research credits, the faculty member acknowledges that if the student's progress is acceptable with regard to expectations articulated for the semester, the student will receive a satisfactory grade for the course.***

CRN	Subject	Course #	Credit Hours	Course Name
	<b>BTNY</b>			Please ensure the CRN corresponds to the correct faculty and degree program RESEARCH 698(MS) or 699(PhD). CRN's change each semester. <b>Maximum of 8 research credits in Fall or Spring. Maximum of 6 in Summer Semester.</b>
	<b>CAND</b>			Enter the appropriate CAND course - 991, 992, or 993 if you expect to graduate at the end of the term. <b>Enter n/a if not applicable.</b>

**Research Expectations:**

**Coursework Expectations:**

CRN	Subject	Course #	Credit Hours	Course Name	B or better required? Enter Yes or No	Updated on your Plan of Study? Enter Yes or No

***\*This form is for your records. All Graduate Students are required to register and confirm their own course and research selections in the Scheduling Assistant in MyPurdue. Completing this form does NOT register you for the research or courses.***

Advisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Student Signature \_\_\_\_\_

Date \_\_\_\_\_