UNDERGRADUATE RESEARCH PROSPECTUS

The University of Memphis
Department of Chemistry

Name (print): ___________________________ Student Number: ________________

Faculty Sponsor: ___________________________ Date: ____________

Course(s) covered by this prospectus (Enter semester you expect to enroll):

4901: ___________  4902: ___________  4903: ___________

COMPLETE the following sections in consultation with sponsor:

Title of proposed study: ____________________________________________

Brief description of the proposed research: ____________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Specific learning objectives for this proposed research: ____________________________

________________________________________________________________________

________________________________________________________________________

APPROVALS:
Student’s Signature: ___________________________ Date: ____________

Sponsor’s Signature: ___________________________ Date: ____________

SUBMIT the completed form to Dr. Bridson: pbridson@memphis.edu or fax: 901-678-3447

Permit(s) issued: ___________________________ Date: ____________