ANS 4905

UF Animal Sciences – Special Problems in Animal Sciences

Student Information: UF ID #: ______________________________
Name (please print): __________________________________________
E-mail: __________________________________ Phone Number: _____________________
Student Signature: ____________________________________________ Date: ______________

*Please Note: This is a graded experience

Discuss/describe the requirements of the project to be completed by the student and supervised by the faculty member:

No. of credits: ________ for Semester / Year: ________________________________

Supervisor Signature: ______________________________ Email: _____________________
Print Name and Phone Number: ________________________________

*NOTE: Form must be completed PRIOR to registration. A copy should be kept by the supervising faculty member as well as by the student, and the original returned to Allyson Trimble (room 100) for registration.

Date enrolled: _______________ By: __________________________ Sec#: __________