Permission form for: University of Manitoba Department of Psychology Registration for Special Undergraduate Courses

**PLEASE EMAIL YOUR COMPLETED FORM TO DR. LAUNA LEBOE-McGOWAN AT launa.leboe-mcgowan@umanitoba.ca AT LEAST TWO WEEKS PRIOR TO THE TERM START DATE.

This form is to be used by students wishing to register for special Undergraduate courses that require the approval of the Department Head and the course instructor, such as Independent Research in Psychology (PSYC 3520, PSYC 3590) and Supervised Field Study in Psychology (PSYC 3560). Approval for other Honours courses is to be obtained on the Honours approval Form. Please check the University of Manitoba Calendar for descriptions of each course. **Students may hold credit for only two of PSYC 3520, PSYC 3560, and PSYC 3590.**

Student Number:

To be completed by Student:

Student Name:

Honours Student:	Major Student:	Completed: 2250 2260 or 2230				
Date of Registration:		Home Faculty:				
Term: FallCourse Number & Tit		Summer				
PSYC 3520* Independent Research in Psychology I (3 credits)						
1510 3320	CRN Section	(Department use only)				
PSYC 3560*		Psychology (3 credits)				
	•	(Department use only)				
PSYC 3590* Independent Research in Psychology II (3 credits)						
		(Department use only)				
* see Universi	ty Calendar for prerequisit					
Note – all dates cannot note that time exten grounds only, and if to	of be the same. This form a sions, as per University he time extension form(s) he student, ensuring ethics	arefully in consultation with the student, with tentative dates. becomes a contract between you and the student. Please Policy, will be granted for medical or compassionate is (are) completed by the final day of classes in the term. s and experiments can be run in a timely fashion. Keep a				
Instructor:						
Brief Calendar-type d	escription of course requir	rements (or attach a brief syllabus):				

	Check if	Weighting Applicable	Expected (%)	Date of Completion	
1.	Contact with instructor				
	a. Attendance				
	b. Participation				
2.	Research Proposal				
3.	Ethics proposal/form/cours	e			
4.	Data Collection				
5.	Data Analysis				
6.	Final Paper (required)				
7.	Other (specify)		/100	⁹ / ₀	
	ent's signature:	1		nte:	
Stuae	the project deadlines. This	•	0.0	oject and that you understand ou understand what is expected of	
	you.				
	uctor's signature:			nte:	
Instr	, 0	ed to sign this form	n. This forms the sylla	s of the complete project to the student bus for this student. You must	
Asso	ciate Head signature: *please note that this form	cannot be signed by	the Undergraduate Ad	visor.	
*** instr	Please email your completed uctor a CRN for registration a			ssed, she will email the student and	
	Note to the student - Copi	es <u>must</u> be provided	l to:		
Instructor			Psychology Department Office		

Associate Head (Undergraduate)