



Neuroscience and Mental Health Institute
 2-132 Li Ka Shing Centre
 112 Street & 87 Avenue
 Edmonton, AB Canada T6G 2E1

NEURO 451/452

Course Proposal & Registration Form

Please email a copy of this form to the NMHI office by the end of the first week of the term

NEURO 451 (Fall)

NEURO 452 (Winter)

Student Name:

Student ID:

Student Email:

Supervisor Name:

Title of proposed research topic for literature review:

Give details of research objectives, methods to be employed, and predict, as far as possible, the time frame required for the stages in the proposed research:

Has the supervisor discussed with the student and agreed to the specific requirements of the proposed project?

YES

NO

What are the arrangements for regular meetings between supervisor and student? If supervisor's lab members are involved in the day-to-day supervision of the student, please indicate name(s) and position(s).

Student Signature:

Date:

Supervisor Signature:

Date: