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**Case Western Reserve University**  
**Department of Chemistry**

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**REGISTRATION PERMIT FOR CHEM 397 UNDERGRADUATE RESEARCH**

Name of Student: \_\_\_\_\_ Semester: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Topic: \_\_\_\_\_

Research Mentor (print): \_\_\_\_\_ No. of hours of CHEM 397 this semester: \_\_\_\_\_

(signature): \_\_\_\_\_

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Is the project supervisor within the Chemistry Department or Secondary Faculty? \_\_\_\_\_

**If NO, please get signature of Undergraduate Committee for approval of CHEM 397 performed outside Chemistry Department. In addition, a one-page description of the research project emphasizing the CHEMISTRY component should be sent to the Undergraduate Committee for approval. A faculty member within the Chemistry Department should also be identified as a sponsor.**

\_\_\_\_\_  
Undergraduate Committee Representative Signature

\_\_\_\_\_  
Chemistry Sponsor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please return this form to Zedeara Pratt in 204 Clapp Hall.

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**EXPECTATIONS & CHECKLIST  
FOR CHEM 397 UNDERGRADUATE RESEARCH**

*This form must be signed AND attached to the final report.  
Failure to return this form may result in a grade of "I" being assigned.*

Name of Student: \_\_\_\_\_ Semester: \_\_\_\_\_

Successful completion of a CHEM 397 requires a final written report, and at least 3 hours of research effort/week for each credit hour earned.

Date	Report Type(s)*

\*Final and any interim reports

I approve the final report by the student.

Research Mentor: \_\_\_\_\_ Date \_\_\_\_\_

I also approve the attached final report (for work performed for non-Chemistry/associated secondary) faculty

Chemistry Sponsor: \_\_\_\_\_ Date \_\_\_\_\_

Final Approval:  
Undergraduate Committee Representative Signature \_\_\_\_\_

Please return this form to Zedeara Pratt in 204 Clapp Hall.