**(PY 451)**

**Permission to Enroll in Undergraduate Research**

**(2023)**

**Instructions: Please fill in all information and forward to the faculty instructor.**

**Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CWID : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**🞎 Spring**

**🞎 Summer 1st Term**

**🞎 Summer 2nd Term**

**🞎 Summer Full Term**

**🞎 Fall Term**

**Section # of PY 451 is \_\_\_\_\_\_\_\_\_\_\_\_\_. CRN#\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of hours approved for this course is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructor's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For faculty instructor:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructor's signature**

**Please forward document to** **clapperson@ua.edu**.