

UNIVERSITY OF TORONTO MISSISSAUGA
Chemical and Physical Sciences
BALLOT FOR ADMISSION TO
JCB487Y5: The Advanced Interdisciplinary Research Laboratory

Please return to: Roxana Moreira-Diaz (Room DV4059B), at the latest – **by the end of June** and Register on ROSI for the course.

SURNAME GIVEN NAME AND INITIALS (print clearly)																	

STUDENT NUMBER (print clearly)								

E-mail address: (must be valid UTOR email, checked directly and frequently)	
	@mail.utoronto.ca
	@utoronto.ca

Telephone Number - Home:	
Telephone Number - Cell	

Academic Program

- NOTES:
1. For course description, pre-requisites and other requirements, refer to the Academic Calendar.
 2. If you would prefer to carry out your 4th year research at the St. George campus, a different application form is required which should be obtained from the St. George Campus Department of Chemistry.

Program Title and Number (to which this course will apply. For example, Chemistry Specialist: ERSPE1376)

Date:		Student's Signature:	
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For Office Use Only					
Approved (check one)		Coordinator signature	Date	Signatures of Course Instructors	
YES:	NO:				