**Research Registration**

**AST 287/487 or PHY 287/487**

**ALL SECTIONS ON THIS FORM MUST BE TYPED EXCEPT FOR THE SIGNATURE SECTION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Student Name:** Click here to enter text. | | **Student I.D. #:** Click here to enter text. | |
| **Email address:** Click here to enter text. | | | |
| **Major: click here to enter text** | | | |
| **AST 287 section #** Click here to enter text. | **AST 487 section #** Click here to enter text. | | |
| **PHY 287 section #** Click here to enter text. | **PHY 487 section #** Click here to enter text. | | |
| **Faculty Name:** **#** Click here to enter text. | | | |
| **Credits to be earned:** **1 credit = 4 hours work per week**  Click here to enter text. | | | |
| **Semester: (semester and year)** Click here to enter text. | | | |
|  | | | |
| Describe research project to be completed this semester:  Click here to enter text. | | | |
| **Please note: Students enrolled in PHY 287 or 487 or AST 287 or 487 are expected to present their work at the annual URECA celebration.** | | | |
| **\*\* Research Report must be completed at the end of the semester\*\*** | | | |
|  | | | |
| **Signature section:** | | | |
| Student Signature | | | Date: |
| Faculty Signature | | | Date: |
| **EMAIL COMPLETED FORM TO:** Diane.Diaferia@stonybrook.edu | | | |