DATE: December 1, 2014

TO: Students Enrolled in Research Honors Course (112:190)
    Mentors of Students Enrolled in Course

FROM: Dr. John Warren, Director
       Dental Student Research Program

SUBJECT: Grades for Research Honors Course (112:190), Fall Semester 2014

GRADE FORM

112:190 Research Honors Course
1 semester hour

Please complete and return this form to Lynn Schaul, N406 DSB, before Monday, December 22, 2014 at 4:00pm.

IMPORTANT: Both student and mentor signatures are required before grades can be recorded.
Only one form needs to be submitted.
Forms submitted after December 22 at 4:00pm or not submitted will result in an Incomplete (I) grade.

I BELIEVE MY GRADE FOR THIS SEMESTER SHOULD BE: __________________ or Incomplete

STUDENT NAME (please print): ____________________________

STUDENT SIGNATURE: ________________________________

MENTOR(S) NAME(S) (please print): ____________________________

MENTOR(S) SIGNATURE(S): ________________________________

RESEARCH OBJECTIVES: (Please use the space below and the back of the sheet to indicate which research objectives were completed and/or list other work.)

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Please return this form to: Office of Dental Student Research, N406 DSB, before December 22 at 4:00pm.