INTEGRATIVE NEUROSCIENCE PROGRAM
APPLICATION FOR UNDERGRADUATE TUTORIAL

Today's Date: ______________________________

College (Check One): ___ FCRH   ___ FCLC   ___ Gabelli School of Business

Current year (Check One): ___ Senior   ___ Junior   ___ Sophomore   ___ Freshman

Student Name: ___________________________________________________          FIDN: _________________________

Instructor's Name: _______________________________________________    Dept. or Division: _________________

Title of Project: ________________________________________________________________________________________________

Description of Course (What are the goals of the course? Expectations for student performance?)
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

This tutorial has been approved for fulfillment of NEUR 4999 for 3 credits for the

____________________  _________________________.

Year                        Semester

____________________________________________________
Instructor’s Signature

___________________________________________________
Program Director’s Signature

__________________________________________________
Dean's Signature