

SCHOOL OF LIFE SCIENCES UNDERGRADUATE MENTORED RESEARCH
Undergraduate Teaching Assistant (UTA) BIOL 499

Student Name: _____ E-mail: _____

NSHE ID: _____ Term: _____

Please check one of the following:

_____ I am taking BIOL 499 for **credit**. I understand that I will be charged for **one credit** by UNLV Cashiering and Student Accounts.

_____ I am taking BIOL 499 as a **volunteer**

Please check which course you will be a UTA for:

_____ BIOL 189

_____ BIOL 196

_____ BIOL 197

_____ BIOL 251

_____ BIOL 351

_____ Other, *please specify*: _____

Please return completed form to WHI 101 or send to biology.help@unlv.edu

Student Signature: _____

Lab Coordinator (Print name): _____

Lab Coordinator's Signature: _____