

ANA 395 Independent Work in Anatomy (1-3 Hours)

Research Contract

In order to receive credit for ANA395, students and their research mentors must complete a contract. *If a contract is not completed each semester by the add/drop date, we may drop you from this class.* If the contract is NOT approved, we will contact you and/or your research mentor.

Academic session in which the research will take place:

Check appropriate: Fall

Spring

YEAR: _____

Research mentors may be any research-active Anatomy and Neurobiology faculty member at the University of Kentucky. A list of Anatomy faculty and their research interests may be found on the University of Kentucky Department of Anatomy and Neurobiology website. Junior and senior students are the primary intended ANA395 participants. Participants should be above average students making substantial progress towards a degree.

Research mentors agree to provide lab space, resources (eg. chemicals), and guidance. Guidance includes safety training as well as training in scientific method, technique, and presentation. Mentors will be asked to grade the student's independent work.

Please provide the following information about you:

Your name _____

Student number _____

Email _____

Phone: _____

Please provide the following information about your mentor:

Your mentor's name _____

Email _____

Phone: _____

Complete page 2 in consultation with your research mentor.

Description of the proposed research work:

Complete this page in consultation with your mentor. (You may attach a extra separate page if necessary.)

1. State your hypothesis or driving principle.

2. Briefly describe the sorts of experiments you intend to perform, including brief technical details.

3. What might the results of these experiments be and how could these results support or refute your hypothesis?

4. Credit hours (**please check**) **1** **2** **3**

How you will be evaluated for a grade. Some examples are frequent personal conferences, diligence in the lab, group meetings, preparation of paper etc.

Student Signature _____ Date: _____

Mentor Signature _____ Date: _____

For information contact Dr. Samuel Franklin (sfranklin@uky.edu) or 859-323-3780
We will contact you ONLY if we have questions regarding your research.

Director of ANA 395 Approved: _____ Date: _____