Complete this checklist in order to obtain Instructor Permission to enroll in PSYC 88 to conduct laboratory or field research. It is intended to help you plan for the course after conferring with your advisor.

Print Student Name ____________________________  Student ID ____________________________  Date Submitted ____________________________

Indicate term(s) in which you would like to enroll in PSYC 88 (e.g. Fall 2022, Winter 2023)

☐ I have taken PSYC 1, 10, and 11 as prerequisites

*Accepted, though not recommended, equivalent courses for PSYC 10 are ECON 10, GOVT 10, MATH 10, and SOCY 10.*

☐ I am NOT using PSYC 88 to fulfill the requirement for a 60 or higher course for my major.

☐ I am counting no more than a total of TWO terms of PSYC 88 and/or PSYC 89 towards my major

☐ I have attached a description (typically a one-paragraph abstract) of the research topic.

☐ I understand that I am required to submit a final report that summarizes my project and experience at the end of my research term. The report should be an 8-10 page paper (double-spaced), but could also take the form of a poster presented at a conference, software package, or other format approved by the Chair of the Undergraduate Committee. I have discussed this requirement with my primary advisor. This report should be submitted to both your advisor and by email to the Chair of the Undergraduate by 5pm on the last day of classes.

☐ I have an advisor who will supervise my Independent Research

______________________________________________  ______________________________________
Print Name of Advisor  Signature of Advisor

☐ If your advisor is NOT a tenured/tenure-track faculty member in the Department of Psychological and Brain Sciences (PBS), the Chair of the PBS Undergraduate Committee must sign below.

__________________________
Chair of the PBS Undergraduate Committee Signature

*Only necessary if primary advisor is not regular faculty in PBS*

Submit completed checklist by email to the Psychological and Brain Sciences Department, psychological.and.brain.sciences@dartmouth.edu.

For department use only

Tracked: ____________  Permission granted: ____________