



**IBiS**  
**INTERDEPARTMENTAL BIOLOGICAL SCIENCES PROGRAM**

**INDEPENDENT RESEARCH ADVISOR AGREEMENT**

\_\_\_\_\_  
Quarter

\_\_\_\_\_  
Year

We agree to work together as research advisor and student on an independent research project for the \_\_\_\_\_ Quarter.

Student Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Preceptor Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Chair, Graduate  
Advisory Committee \_\_\_\_\_ Date \_\_\_\_\_  
Signature

**Return to Program Office (Hogan 2-100) by \_\_\_\_\_**  
Due Date