

*****STUDENT'S RESPONSIBILITY TO REGISTER – NOT THE DEPARTMENT OFFICE*****

*California State University, Fresno
Department of Biology*

Phone # _____

Fresno State Email: _____@mail.fresnostate.edu

Biotechnology Industrial Experience Approval Form

To register for industrial experience units, complete this form. Obtain the signatures of your BIOTC 275 instructor and the biotechnology graduate coordinator. Turn the form in to the Biology Department. The department staff will obtain the department chair's signature. After the department chair has signed the form, the department staff will issue you a class number and a permission number. When you receive the class number and the permission number you may then register online. The original form remains in the department office.

Please print:

Last Name
First Name

Student ID Number: _____

BIOTC 275 = 3 Units Fall ____ Spring ____ Year _____

Name of BIOTC 275 Instructor (please print)

BIOTC 275 Instructor (Signature)

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Biotechnology Graduate Coordinator (Signature)
Department of Biology

Chair, Department of Biology (Signature)

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Independent Experience class# and permission# to be filled out by Biology Department:
Ind. Exp. Class # _____ Permission # _____