**Research Registration**

**AST 287/487 or PHY 287/487**

**ALL SECTIONS ON THIS FORM MUST BE TYPED EXCEPT FOR THE SIGNATURE SECTION**

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| --- | --- |
| **Student Name:** Click here to enter text. | **Student I.D. #:** Click here to enter text. |
| **Email address:** Click here to enter text. |
| **Major: click here to enter text**  |
| **AST 287 section #** Click here to enter text. | **AST 487 section #** Click here to enter text. |
| **PHY 287 section #** Click here to enter text. | **PHY 487 section #** Click here to enter text. |
| **Faculty Name:** **#** Click here to enter text. |
| **Credits to be earned:** **1 credit = 4 hours work per week**  Click here to enter text. |
| **Semester: (semester and year)** Click here to enter text. |
|  |
| Describe research project to be completed this semester: Click here to enter text. |
| **Please note: Students enrolled in PHY 287 or 487 or AST 287 or 487 are expected to present their work at the annual URECA celebration.** |
| **\*\* Research Report must be completed at the end of the semester\*\*** |
|  |
| **Signature section:** |
| Student Signature  | Date: |
| Faculty Signature  | Date: |
| **EMAIL COMPLETED FORM TO:** Diane.Diaferia@stonybrook.edu |