How does this project relate to neuroscience?


Research Mentor: What do you expect of the student?

☐ Keep lab notebook         ☐ Learn protocol
☐ Attend lab meetings       ☐ Conduct experiments
☐ Read journal articles     ☐ Write paper

Required Signatures

I agree to be engaged in my research project, to adhere to the scheduled hours, and to seek assistance from my mentor as needed.

Student Signature: ___________________________ Date: _____________

I agree to mentor the above student by assigning a project and checking progress throughout the term.

Faculty Mentor Signature: ___________________________ Date: _____________

Department Authorization

Students must gain departmental authorization before being enrolled. Please submit to any one of the following for authorization and enrollment:

Dr. Susan Sesack (Sesack@pitt.edu), Dr. Jon Johnson (jjohnson@pitt.edu),
Dr. Debra Artim (dea20@pitt.edu), Dr. Erika Fanselow (Fanselow@pitt.edu)

Approved by_________________________ Date____________