

**DEPARTMENT OF CHEMISTRY SPECIAL STUDY COURSE REQUEST**  
**(98, 99, 192, 194H, 198, 199; OTHER \_\_\_\_\_)**

**ENROLLMENT INSTRUCTIONS:**

- Complete this form in full: A new form is REQUIRED for each quarter.
- Leave completed form in the staff advising drop-folder outside of CHEM 315; Forms must be legible.
- A CRN to register will be emailed to you when the form has been processed.
- Request forms cannot be processed unless a **Certificate of Laboratory Safety Fundamentals** has been submitted to CHEM 315.
- A minimum completion of 84 units is required to undertake an upper-division special study course (192, 194H, 198, and 199) for degree credit. Limitation on most special study courses is a maximum of 5 units per term (exception: honors research courses, which carries 2 units per term).

**UNIT/HOUR BREAKDOWN:**

- Fall, Winter, Spring: 3 hours per week = 1 unit
- Summer Sessions 1 & 2: 5 hours per week = 1 unit

**REGISTRATION DEADLINE:**

Forms for special study courses will only be accepted during normal course registration periods up until the last day to add courses for the quarter (i.e. 20th day of instruction).

\_\_\_\_\_ Full Name (Print)

\_\_\_\_\_ Student ID

\_\_\_\_\_ Major

\_\_\_\_\_ Quarter

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

UCD Email: \_\_\_\_\_

Total Units Completed: \_\_\_\_

Overall GPA:

\_\_\_\_\_

Anticipated Weekly Hours: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

**RELEVANT UPPER DIVISION CHEMISTRY COURSE(S) COMPLETED:**

QUARTER/YEAR

COURSE NUMBER

GRADE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COURSE IDENTIFICATION (98, 99, 192, 194H, 198, 199; OTHER \_\_\_\_\_):**

\_\_\_\_\_  
Department                      Number                      Section                      Unit(s)                      Quarter/ Year

Estimated average student/faculty contact (hours/week): \_\_\_\_\_

Estimated enrollment in group study course: \_\_\_\_\_

Topic: \_\_\_\_\_

Course Plan: Explain precisely the work to be undertaken (i.e., subject matter, format of instruction, texts, or reading).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grading: Explain criteria for awarding a passing grade.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your primary instructor, the faculty member charged with overseeing your activities, must sign this form before your request is processed and a CRN to register is issued. A graduate student, post-doctoral researcher, or temporary instructor cannot serve as your primary instructor.

Also, your request form cannot be processed unless a Certificate of Laboratory Safety Fundamentals has been submitted to CHEM 315.

\_\_\_\_\_  
**Instructor's Signature                      Instructor's Name (Printed)                      Date**

The Department's Undergraduate Advising and Student Affairs Office retains forms in departmental files for two years from beginning of current term for possible review by the appropriate college courses committee and the Senate Committee on Courses of Instruction.