Learning Agreement Form – Winter 2026

BIOC 3620.03

Experiential Learning in Biochemistry & Molecular Biology

Course Coordinator: Dr. Kathryn Vanya Ewart (vewart@dal.ca) Room 9S, 9th floor, Tupper Building

Student Name: _____ Student Number: _____

Student Email: _____ Supervisor Name: _____

Part A should be completed by the Biochemistry & Molecular Biology Department **faculty member** who has agreed to supervise the student's BIOC 3620 work experience.

Part B must be signed by both the **prospective supervisor** and the **student**.

Part A ***Learning Activities and Outcomes*** (The lists can be extended as required.)

Learning Activities
Over the course of the semester, the student will undertake the following research-relevant activities:

1.

2.

3.

4.

5.

6.

Learning Outcomes
By the end of this work experience, the student will understand and know how to do the following biochemistry and molecular biology-relevant methods and procedures.

1.

2.

3.

4.

5.

6.

Part B Agreement to the Terms of the Work Experience

Work Experience Schedule

Start Date: _____ End Date: _____ Total number of weeks: _____

Average hours/week the student is expected to commit for the learning activities: _____

Notes:

1. The minimum research time for the class is 70 hours and the maximum is 90 hours.
2. The students will begin research in week 2 of the semester, as the course now includes introductory online lectures, safety training and a quiz prior to beginning research.
3. This course has undergone substantial changes. Information on new evaluations required from supervisors (and dates) will be provided in the first week of classes.

Signatures

Supervisor:

I agree to provide activities that will enable the student to have the opportunity to fulfill the learning outcomes as outlined in Part A with appropriate attention to safety and skill development. I also agree to contribute to the evaluation of student performance following directions provided to me in the first week of the semester.

Supervisor Signature: _____ Date: _____

Student:

I agree to undertake the learning activities outlined in Part A and to the terms outlined above.

Student Signature: _____ Date: _____

Coordinator:

The student indicated above **has permission** to register for BIOC 3620.

Coordinator signature: _____ Date: _____