

FMPH 498 PRE-ENROLLMENT FORM

Complete the questions below to request an independent study course. Submit the completed and signed form to the MPH Program Coordinators (mphinfo@health.ucsd.edu) for processing. A Course Section ID code will be requested from the Registrar's Office once the form is received. Please allow 72 hours for this course to be created and posted in the Schedule of Classes. Once the section has been created, this information will be sent to the email address that you provided on the form. Grading Method is Satisfactory/Unsatisfactory Only. If you have further questions, contact the MPH Program Coordinators.

SECTION I: Student Information

STUDENT NAME: _____ STUDENT PID: _____

STUDENT EMAIL ADDRESS: _____

CONCENTRATION:

- | | | |
|--|--|--|
| <input type="checkbox"/> Epidemiology | <input type="checkbox"/> Health Behavior | <input type="checkbox"/> Public Mental Health |
| <input type="checkbox"/> Technology/Precision Health | <input type="checkbox"/> Health Policy | <input type="checkbox"/> General Public Health |

QUARTER YOU PLAN TO ENROLL IN FMPH 498:

- Fall Winter Spring Summer

SECTION II: Faculty Mentor Information

FACULTY NAME: _____

FACULTY EMAIL ADDRESS: _____

SECTION III: Independent Study Details

Number of units:

1 unit = 1 hour face-to-face + 2 hours outside work per week

- 1 unit 2 units 3 units 4 units 5 units 6 units

What type of independent study will you be doing? (Select from the following types of independent study activities. If not listed, please type in "other" section). *Select all that apply.*

- Data collection
- Develop a new method or tool (e.g. apply a new statistical method, develop a new instrument)
- Literature review
- Develop a manuscript
- Develop a portion of a manuscript (e.g. methods, results)
- Conduct data analysis (e.g. learn new skill; demonstrate analytic method)
- Develop human subjects/IRB protocol (e.g. draft documentation for IRB review)
- Grant proposal process (e.g. develop grant design, rationale, protocol development)

Other (please specify):

Please provide a brief description of what you will be doing for this Independent Study.

What are the deliverables for this Independent Study? If not listed, please type in “other” section. *Select all that apply.*

- Written section of manuscript
- A complete draft of a manuscript
- Written response to review comments
- A detailed analysis plan
- Written questionnaire
- Set of tables and figures for manuscript
- Submission of IRB protocol
- Written literature review
- Detailed report on review or finding
- Other (please specify):

SECTION IV: Faculty Mentor Attestation

My signature verifies that I: (1) support all of the plans detailed above, (2) will be available to guide the student through this independent study, and (3) will submit a grade based on the student’s performance at the conclusion of this quarter.

Independent Study Faculty Mentor

Signature

Date