BMS Major Non-credit Capstone Experience Approval Form

This form is used to document and obtain approval for a proposed non-credit capstone experience. Please submit this form, along with a typed description of your proposed capstone experience and how it meets some or all of the capstone criteria (see below), to your advisor before beginning the capstone experience. At the end of the experience, you must obtain the signature of the on-site supervisor and return this form to your advisor for final approval.

**Pre-approval**

Student Name: ________________________________________________________________

Email: ________________________________ Current Class Standing: __________

Expected Graduation Date: ______________ Earned Credits: _________________

**Proposed Non-credit Capstone Experience:**

Type of Activity: _______________________________________________________________

Name of On-site Supervisor: _____________________ Title: _______________________

Address: _______________________________________________ Email: _______________

Attach a typed description (200 words or less) of your proposed capstone experience and how it meets two or more of the following criteria:

- Synthesizes and applies disciplinary knowledge and skills
- Fosters reflection on undergraduate learning and experience
- Demonstrates emerging professional competencies
- Applies, analyzes, and/or interprets research or data or artistic expression
- Explores areas of interest based on the integration of prior learning.

Signature of Advisor: _____________________________ Date Approved: ______________

**Post-approval**

**Student completed a minimum of 50 hours in the above named activity on ____________**

Date

Signature of On-Site Supervisor: _____________________________ Date: ______________

Signature of UNH advisor: _________________________________ Date: ______________

- See more at: [http://biomedical.unh.edu/capstone-experience-bms-majors](http://biomedical.unh.edu/capstone-experience-bms-majors)