Course Contract

anuary 30 (Spring Semester) / May 30 (Summer Semester).	
tudent Name	Student ID #
tudent Signature	Date
Committee Members (check box for chair of committee):	
Name & Title	
Professor Signature	Date
Name & Title	
Name & Title	
Professor Signature	Date
Copic: □ Research □ Grant (Check box that applies and	d write topic on the line below.)
Semester Objectives: List what activities you want to accomplish this semester (pull f Must choose 2/3 minimum of the activities listed in the Monthly Report in one semester.)	