Student/Faculty Contract

Contract for:
- Directed Study/Research
- Directed Instruction
- "EXC" Registration
- "IND" Registration

Copies:
- White: department
- Yellow: Faculty Evaluator
- Pink: Student brings to 49 Johnston
- Gold: Student

The University of Minnesota is an equal opportunity educator and employer.
This material is available in alternative formats upon request. Please contact Career & Community Learning Center, 612-624-7577.

Please type

Student's Name________________________________________ I.D. No._________________
Major____________________College__________________
Fr So Jr Sr Grad Adult Special

Faculty Evaluator (Name & Title) _______________________________________________________

Department__________________________________________Course No.__________________
Semester____________Year__________Check One:  
- Directed Study/Research  
- Directed Instruction  
- EXC Registration  
- IND Registration

No. of Credits_________Grading (check one)  
A/F S/N

Project Title (your own):___________________________________________________________
Learning Objectives:

Methods and Resources to be used (e.g. books, articles, workshops):

Check if applicable:  
- Internship/Field Learning  
- Study Abroad
Results to be evaluated (e.g. written paper, artwork, presentation):

Approved – Faculty Evaluator’s Signature Date  
Approved – Dept. Signature Date

Student’s Signature Date  
Date the Study will be complete