PSYCHOLOGY 484 HONORS CONTRACT

Student’s name_____________________________________ UIN_________________

Major __________________________________________________________________________

Phone #_________________________ email___________________________________________

Semester _____________ Supervising Faculty (please print) ____________________________

Credit Hours: (0-3 hours)______hrs.

Briefly state the topic area to be covered: _____________________________________________

________________________________________________________________________________

What activities are required by the student (e.g., library research, experimentation, etc.)? List
readings, methodologies, and duties to be fulfilled (as applicable).

________________________________________________________________________________

________________________________________________________________________________

Specify additional determinants of the student’s a grade (S/U only). ________________

________________________________________________________________________________

Supervising faculty signature ______________________________________________________

_______________ (date)

Graduate student signature _________________________________________________________

_______________ (date)

Student signature ________________________________________________________________

_______________ (date)

Take completed form to Milner Room 205 between 8-11:30AM DURING OPEN REGISTRATION to
be forced into this course. Completion of this form does NOT register you for the course.