PSYCHOLOGY 484 HONORS CONTRACT

Student’s name_____________________________________ UIN_________________

Major ______________________________________________________________________

Phone #____________________________ email__________________________________

Semester ___________ Supervising Faculty (please print) ______________________

Credit Hours: 3

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 8am and noon DURING OPEN REGISTRATION
to be forced into this course. Completion of this form does NOT register you for the course.