PSYCHOLOGY 485 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 8am and noon DURING OPEN REGISTRATION
to be forced into this course. Completion of this form does NOT register you for the course.