# Student/Faculty Contract

## College of Liberal Arts

### University of Minnesota

### Student Info

- **Student’s Name:** __________________________
- **I.D. Number:** __________________________
- **Major:** __________________________
- **College:** __________________________
- **Fr**  **So**  **Jr**  **Sr**  **Grad**  **Adult Special**

### Dept. Info

- **Faculty Evaluator (Name, Title):** __________________________
- **Department:** __________________________
- **Course No.:** __________________________
- **Semester:** __________________________
- **Year:** __________________________
- **Check One:**
  - Directed Study/Research
  - EXC Registration
  - Directed Instruction
  - IND Registration
- **No. of Credits:** __________________________
- **Grading (check one):**
  - A/F
  - S/N

### Course Info

- **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):** __________________________

### Signatures

- **Approved – Faculty Evaluator’s Signature**
  - **Date:**
  - **Approved – Dept. Signature**
  - **Date:**
- **Student’s Signature**
  - **Date:** __________________________
  - **Date the Study will be complete:** __________________________

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