Geography G450: Requirements for Undergraduate Readings and Research

Name:_________________________________________ ID Number:________________________
Address______________________________ City____________________ State____ Zip___________
Phone:(H)____________________(W)_______________________E-mail:_______________________
Major_______________________Minor______________________School________________________
Course G450 Sect.#__________ Credit Hours__________ Semester____________________________
Instructor________________________ E-mail_____________________ Phone____________________

Student Section: This is your contract for completing this course. This document will be on file in the geography office. In order to receive credit, you must adhere to the program designed by you and the instructor. This course is designed to count as elective credit for majors and Area 3 for non-majors. This proposal must be approved by the department chair and will be circulated for comments by other full-time faculty.

Other Geography courses (course numbers or names):

Related courses you have completed:

Briefly explain what specific topic you plan to explore independently:

In what ways will your project provide valuable experience for you that cannot be achieved in regular course work?

Note: all general rules regarding academic behavior, misconduct and plagiarism, as outlined in the SLA handbook, apply to this course.
**Instructor Section:** Carefully complete this section so the student will have every requirement they need to complete the course. In all fairness, you cannot add material without the consent of the student as this may cause them to not complete the course by the agreed time. It is your responsibility to monitor the progress of the student.

Detail the specific steps the student will need to complete along with the specific nature of how the student will be evaluated.

Outline the time table for completing requirements and final completion date:

How often will you meet with the student and when?

**Signatures:** Obtain signatures 1-3 before turning in to the geography office.

1) ___________________________________________________________  __________________________________________ Date

   Student

2) ___________________________________________________________  __________________________________________ Date

   Instructor

3) ___________________________________________________________  __________________________________________ Date

   Department Chairperson

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