## SCHOOL OF COMMUNICATION GRADUATE STUDIES & RESEARCH

## **Contract of Terms for Project or Directed Research**

Agreement/Approval Form for 695, 698, 699, or 799

(To be filled out by the student and the supervising faculty member)

	Student Number
Email Address	Local Phone Number
(state semester of enrollment) , v	(fill in Dept.) 695, 698, 699, or 799 (circle one) for th with the understanding that the student will fill out the Core student 's choice. It must be returned by the "Last day for
	Program Director
GENERAL TOPIC:	
RESOURCES TO BE UTILIZED:	
BRIEF TOPICAL OUTLINE OR PLAN	N: (if more room is needed, attach additional sheet)
STATED OUTCOMES: (in other words, a grade?)	, upon completion of this, what will the student be submitting
itted by: Signature of Student	 Date

Date

Print Name / Signature