

CONTRACT FOR LIBERAL STUDIES 399/499
INDEPENDENT READINGS

STUDENT'S NAME _____ STUDENT NUMBER _____

CLASS STANDING _____ MAJOR EMPHASIS _____

TERM IN WHICH COURSE WILL BE TAKEN _____ INSTRUCTOR _____

TITLE OF COURSE _____ CREDIT HOURS _____

PURPOSE AND SCOPE OF COURSE:

REQUIRED AND OPTIONAL READINGS:

NUMBER AND LENGTH OF MEETINGS WITH INSTRUCTOR:

COURSE REQUIREMENTS (EXAMS, PAPERS, PROJECTS, ETC.)

Date _____ Student Signature _____

Instructor _____

Lib Studies Coordinator _____

Faculty evaluation (grade or comments) _____
