

# H575 Graduate Readings Contract

For both your records and our records, please complete the following form for each H575 Graduate readings course you wish to take. Please note, you must have this contract completed before you will be granted on-line authorization to take the course.

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Semester \_\_\_\_\_ Section # \_\_\_\_\_ Number of Credits \_\_\_\_\_

Instructor \_\_\_\_\_

Please describe below the work to be completed. Include goals of course, number of readings, titles of readings (if possible) and the date work is to be completed.

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Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Instructor's Signature \_\_\_\_\_ Date \_\_\_\_\_