

THE UNIVERSITY OF TEXAS OF THE PERMIAN BASIN
CONTRACT STUDY AGREEMENT

SEMESTER.....

Name.....Student UID.....

a. Dept.....Course No.....Section.....Credit Hour.....

b. Beginning date.....Expected completion date.....

c. Faculty Supervisor.....

d. Consultants.....

e. Title of Study.....

f. Brief statement of proposal:

1. Objectives:

2. Proposed activities:

3. Results expected

4. Criteria for evaluation:

5. Legal implications:

6. Special University facilities, equipment, or services required (laboratory, instruments, computer, space secretarial or technical assistance, etc.) requires Deans approval.....

Student signature.....Date.....

Faculty Supervisor signature.....Date.....

Dean/Chairman signature.....Date.....