

UNIVERSITY OF DUBUQUE LEARNING CONTRACT

Fall _____ Spring _____ Summer _____

A learning contract is for individualized, out-of-classroom learning. The greater the care taken in writing this contract, the greater the prospects for substantive learning. The contract is the syllabus for the course. Please note that a completed contract does not constitute registration for the course. Separate registration materials must also be filled out and presented to the Registrar's Office.

STUDENT'S NAME _____ ID NUMBER _____

COURSE NUMBER/TITLE: _____

TO BEGIN: _____ TO END: _____ EXPECTED GRADUATION DATE _____

INSTRUCTOR: _____ CREDITS: _____ TOTAL CREDITS FOR TERM _____

COURSE COST: _____

Program Category (check one)

Experiential:

Individual:

___ Independent Research (391, 392, 491, 492)

___ Off-campus program - Identify: _____

___ Tutorial (Special rationale required)

1. Attach syllabus or course description:

2. Rationale for course: _____

3. Hours (contact hours, work hours, weekly schedule, etc.) _____

4. Learning objectives or attach syllabus _____

5. Basis for evaluation: _____

6. Student remuneration (if applicable): _____

APPROVED BY (please sign and date): **NOTE: Financial arrangements for course must be made PRIOR to instruction commencing.**

STUDENT DATE

INSTRUCTOR DATE

DEPARTMENT CHAIRPERSON DATE

STUDENT ACCOUNTS DATE

ACADEMIC DEAN DATE

Date Final Grade Submitted: _____

(Initials)

NOTE: Copy of this form and course syllabus attached, will be filed in the student's permanent records in the Registrar's Office.

Copies: WHITE - Registrar, YELLOW - Human Resources, PINK - Professor, PHOTOCOPY - Student