

Project Agreement Form

College of Education

Semester: Year: Date Initiated:

Name: PID:

MSU Email address: @msu.edu

Level: MA/MS EdS EdD PhD LG

Program Name/Code:

Academic Advisor:

Course Number: Section Number: Credits:

Note: This form requires enrollment in CEP890, 990, EAD890, 894, 990, 994, TE890, 894, 990, 994.

Title and brief description of the project:

Signature of Professor Directing Project: _____
 Director's Name:

Director's Campus Address:

Signature of Academic Advisor: _____

Signature of Student: _____

NOTE: Students are cautioned regarding the maximum number of credits allowed per semester in CEP890 (9 crs.), 990 (9 crs.); EAD890 (9 crs.), 894 (9 crs.), 990 (15 crs.), 994 (6 crs.); TE890 (9 crs.), 894 (9 crs.), 990 (10 crs.), 994 (6 crs.). Excess credits will be adjusted from the student's record. Check the description of courses for further explanation.

Only faculty members in the College of Education are eligible to sponsor students in independent study or field projects. Please do not ask graduate students or teaching assistants to sponsor an independent study or field project.

Return this form to the appropriate department: TE: Rm. 320; EAD: Rm. 421; and CEP: Rm. 448 Erickson Hall as soon as possible. Project Agreement forms must be filed PRIOR to registration.

Dept. personnel, please return to program secretary.

**P – N
Grading Only**