



New College

THE HONORS COLLEGE of Florida

Office of the Registrar
5800 Bay Shore Road (PMD-115)
Sarasota, FL 34243-2109
Phone: (941) 487-4230 Fax: (941) 487-4478

Semester	Year
Fall	_____
Spring	_____

Contract

(See Academic Calendar for Deadline)

On-Campus Study
Off-Campus Study

This document embodies planning toward core-learning goals, including communication skills, content knowledge, and critical and creative thinking skills.

Name: _____ (Last) _____ (First) SID: N _____
Expected Year of Graduation: _____ Box No.: _____

GOALS *(Specify Short and Long Term):*

Course Code <i>(courses only)</i>	Course Name	Internship?	Session* <i>(Please check one)</i>	Name of Instructor/Evaluator <i>(Initials required for Tutorials/IRPs/Internships, etc.)</i>
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____
_____	_____		A M1 M2 1MC	_____

*(A=Full Term; M1=Module 1; M2=Module 2; 1MC=Full Term for Module Credit Equivalent)

CERTIFICATION CRITERIA *(required minimum workload of 3 units):*

DESCRIPTIONS AND OTHER ACTIVITIES:

Advisor: _____ (Name) _____ (Signature) Date: _____

Student Signature: _____ Date: _____