

Interdisciplinary Health PhD Program

Application for IH685: Graduate Research

Student Name:	Student ID:
Student E-mail:	Student Phone:
Student Advisor:	
Credit Hours (1 – 6):	
Semester (note: a new form must be filed each semester):	

Note: grading system for these courses is “Pass (P) or “Fail” (F)

Supervising Faculty/Project Director:	Phone:
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The following information should be discussed and agreed upon between the student and Supervising Faculty/Project Director as indicated by the signatures. Obtain the Academic Advisor’s signature (if different from the Supervising Faculty/Project Director) and the Interdisciplinary Health PhD Program Director’s approval signature. The Supervising Faculty/Project Director, PhD Program Director, and student should retain a copy of this form for their records and regard this as the terms of agreement for successful completion of the pre-candidacy research. Please fill out the information below AND complete the form on the reverse side. Adherence to the guidelines set forth by this document, and recommendations by the Supervising Faculty/Program Director, will dictate the final grade (pass/fail).

Brief project description, outline of activities, procedures, content &/or other requirements*:
 (*note: a more detailed agreement is on the reverse side or attached.)

Please see detailed learning outcomes and deliverables on the back side of this document.

Student Signature:	Date:
Supervising Faculty/Project Director Signature:	Date:
Academic Advisor Signature (if different from above):	Date:
Program Director Signature:	Date:

Interdisciplinary Health PhD Program

Detailed Contract/Agreement Form

Specific learning objectives/outcomes from the project:

Specific duties/responsibilities/deliverables for the project:

Criteria for grade (e.g., to receive a pass, the student must successfully complete all duties/responsibilities/deliverables listed above):

Any other information necessary for graduate research (e.g., frequency of meetings or updates on progress from the student):