S/U Contract

Instructions: Complete this form and have it signed by your instructor and the Graduate Director. Return the original to the Graduate Program Specialist. This must be accomplished no later than the third week of class, unless otherwise approved by the instructor.

Student Name: _______________________________ U-ID#: __________________

Course Title: _______________________________ Semester: ______________

Ref #: __________ Prefix: _________ Course#: ______________ Section: _______

I am applying to take the above course on an S/U basis. In making this application, I affirm that I understand the following:

1. In order to earn a grade of S, my work will meet the course requirements for a letter grade of C or better.
2. I will be required to fulfill all of the normal course requirements (i.e. class attendance, exams, papers), and my grade will be recorded in the instructor's grade book according to the regular A, B, C, D, F scale.
3. The core requirements for my degree cannot be taken as S/U, except with special permission from the Graduate Director.
4. Three credits may be taken as S/U and applied toward my degree as elective credit, except where permission is otherwise granted by the Graduate Director.

(Important: If you are unclear about any of the above conditions, please discuss them with your advisor for clarification.)

______________________  ___________________  ______________
Student Name                      Signature                      Date

______________________  ___________________  ______________
Instructor Name                   Signature                      Date

______________________  ___________________  ______________
Graduate Director                 Signature                      Date