PBSI 484 CONTRACT

STUDENTS may email their completed contract to PSYCADVISING@TAMU.EDU during OPEN REGISTRATION to be forced into the course.

Student's Name:			
UIN:			
Major:			
TAMU Email:			
Phone #:			
Supervising Faculty (please print)		REQUIRED	
Semester Term Year:		Spring 10-Week Summ	
 Credits Hours (o to 3): (hrs.) REQUIRED Any changes to Credit Hours must be submitted on a New Contract BEFORE 4pm on the Last Day of Add/Drop for the semester term. Students registering for 1 – 3 credit hours will be billed tuition and fees for this course. Students registered for 0hrs might be charged fees. Please contact Student Business Services with any questions. 			
Briefly state the topic area to be			
What activities are required by the methodologies, and duties to be		-	•
Specify additional determinants	of the student's grade (S/U or	nly):	
Supervising Faculty Signature & Dat	Required ce	Student's Signature & Date	_ Required

<u>NOTE:</u> This form must be emailed to <u>psycadvising@tamu.edu</u> to be registered for the course. Please contact Student Business Services with any questions about tuition and fees. Be mindful of registration deadlines to avoid late fees.