

RESEARCH PRACTICUM FORM



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Semester

**STUDENT INFORMATION**

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Last First M.I.

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E-mail PeopleSoft #

**FACULTY MENTOR INFORMATION**

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Last First M.I.

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Title Department School

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E-mail Campus Address Phone

**STUDENT AND FACULTY MENTOR SIGNATURES**

We understand that Research Practicum is a 0-credit practicum. Student responsibilities with respect to the Research Practicum are jointly negotiated between the student and the faculty mentor.

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Student Signature Date

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Faculty Mentor Signature Date

Submit completed application to: [Undergraduate Program Administrator](#)