Learning Contract

Microbiology (11:680)

PI Signature



For questions contact: Program Director: Dr. Ines Rauschenbach | E-mail:

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Date

Instructions: Please complete the form below with information about your project and the desired course you wish to take. Once completed and signed by your Principal Investigator (PI), please email the form back to the Microbiology Program Coordinator or Program Director for review.

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Personal Information		
First Name	Last Name	RUID#
Email	Graduation Year	Phone
Course Berested		
Course Reqested		
Course Name	Course Number	Index#
Semester	Credits (3 credits = 150 hours)	
Project Proposal		
Project Title:		
-		
Goals: Provide two goals that you are a	aiming to achieve with this project	
Goal #1:		
Goal #2:		
Student Signature		Date
Principal Investigator (PI)		
Name	E-mail:	Department