NUTRITIONAL SCIENCES EXPERIENTIAL LEARNING PROPOSAL FORM

Students must complete this form and obtain signatures of approval BEFORE registering. Return the completed form to Jennifer Ravia in Shantz 324 or to the NSC main office in Shantz 309. This form is for department records, serves as a contract between the student and the department and is used to assign a grade at the end of the semester. Reminder: The last day to register for courses without a $250 late charge in the Fall/Spring semesters is the 21st day of classes. For Winter/Summer sessions to avoid a $50 late charge, register by the last day to drop with deletion from the record.

Student/Project Information:

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Student ID#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Phone #</td>
<td>Student Email</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Number of Units</th>
</tr>
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<table>
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<tr>
<th>Semester</th>
<th>Year</th>
<th>Advisor</th>
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</table>

Title of Project

Estimated hours/week student will spend on project

Estimated project advisor/student contact hours/week

Brief description of project, including anticipated product (attach additional page if necessary):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signatures:

STUDENT: ___________________________ DATE: ____________

PROJECT ADVISOR: ___________________________ DATE: ____________