



Independent Reading Course Contract

Part A: Please complete, sign and deposit in Graduate Program Co-ordinator's office ED 244

Student Name					Student #	
Student Email						
Professor Name					Office #	
Professor email						
Program	Educational Leadership		Education & Society		Second Language Education	
Term	Fall		Winter		Spring/Summer	
Number of credits	3.0		6.0			

Part B: Completed by Graduate Program Coordinator

CRN		Course #		Section #	
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Part C: Department Approval

Chair/GPD name		Chair/GPD signature	
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COURSE DESCRIPTION:

LEARNING OBJECTIVES:

COURSE OUTCOMES

EVALUATION CRITERIA
READING LIST

I have reviewed and find acceptable the above learning contract.

Date:		Student Signature	
Date:		Professor Signature	
Date:		Program Director Signature	