

UNDERGRADUATE RESEARCH LEARNING CONTRACT

IT IS THE STUDENT'S RESPONSIBILITY TO SUBMIT THIS CONTRACT.

Submit form to: https://tinyurl.com/QUIM4999

Student Name		Email	@upr.edu
		Phone	
		Major(s)	
Mentor's Name		Email	@upr.edu
Mentor's College	·····	Mentor's Department	
Section II. Research E	xperience (Please pri	int legibly.)	
Research Site			
Research Topic/Title			
Start Date	End Date	Expected	hours per week
such as presentations, pap			
such as presentations, pap Brief Methodology or Pro	ers, gallery space, article cess for Project (Specif	es, etc.)	
such as presentations, pap Brief Methodology or Pro	ers, gallery space, article cess for Project (Specif	es, etc.)	
such as presentations, pap Brief Methodology or Pro Skills to be acquired/exercis	ers, gallery space, article o cess for Project (Specif	es, etc.)	
such as presentations, pap Brief Methodology or Pro Skills to be acquired/exercis Knowledge/training to be ac	ers, gallery space, article cess for Project (Specif ed quired	es, etc.) ïc measurements, brands, etc. ar	
such as presentations, pap Brief Methodology or Pro Skills to be acquired/exercis Knowledge/training to be ac	ers, gallery space, article cess for Project (Specif ed quired	es, etc.)	

Section V. Work Schedule

Time hours/week	Week	Planned Tasks
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Section III. Compensation (Please print legibly.)

The student researcher a will a will not be compensated with a bourly rate stipend during the experience at _____ per _____

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Section IV. Emergency Contact Information

Name of the person to contact in case of emergency: _____

Phone: ______

Section V. Academic Credit (Please print legibly.)

Course Section		Semester:	Fall	Spring	Summer	Year
Credit Hour(s)	(insert "0" if non-credit)	N	ote: 5	hours/we	ek = 1 crea	lit hour

Section V. Approval Signatures

We, the undersigned, indicate approval of this experience described in this learning contract. Amendments may be made with agreement between researcher and research mentor.

Student Researcher Signature	Date			
Research Mentor Signature	Date			
Submit completed contract to uprrp.quimica@upr.edu	for scanned distribution to all parties included in this			
document.				
Optional: List additional email addresses below if other	s should receive a scanned copy of this document.			