This agreement relates to registration for _____ credit hours of ENTO 485 or 685 (circle one) - Directed Studies for the __________ semester (fall, spring, first or second summer) of ________ (year) at Texas A&M University.

Student's Name ___________________ ID# ____________________________
College __________________________ Major ___________________________
Date ____________________________ Phone___________________________
Address _________________________ Email ___________________________
City, State, Zip ____________________
Professor of Record ________________ Title ____________________________

The student needs to complete the following two requirements to earn credit.

1. Within one week of receipt of this document, the student is to provide to the Professor of Record a one to two page description of the project to include the following:

   a. Describe the overall problem to be addressed.
   b. Provide a section on scientific and/or professional background that may be relevant to the directed study being done.
   c. List specific objectives to attain the goal and brief description of how each objective will be achieved.

   The project will be reviewed and more information may be requested. A copy of this project proposal will be placed in the student’s record in the Department of Entomology.

2. By the final day of classes for the semester, the student is to submit a project report that summarizes activities, experiences, results and conclusions. This summary should relate to the project description submitted at the beginning of the semester. The report will be evaluated for content, substance, and professional quality. Satisfactory completion of these steps will determine the grade for the hours of credit requested. A copy of this report will become part of the student’s record in the Department of Entomology.
SUMMARY REPORT

Project Title: ______________________________________________________
_________________________________________________________________

Project Goals, Objectives, and Procedures: ______________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
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Summary of Results/Experiences:______________________________________
_________________________________________________________________
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_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Professor’s Signature: ____________________________ Date:______________

Student’s Signature: _____________________________ Date:______________

(Additional pages may be used)

Revised 9/29/04