

**CONTRACTED STUDY AGREEMENT**  
**(Complete with the professor of your contracted study)**

*(Copy this form for use)*

Student: \_\_\_\_\_ Email: \_\_\_\_\_

Professor: \_\_\_\_\_ Email: \_\_\_\_\_

**Name of the Contracted Study:** (The contracted study needs a name to be entered into the student's record.)

\_\_\_\_\_

*Write the following items on an attached document, single-spaced, 12 pt. type:*

**Purpose:** (The purpose of the course reflects the student's concentration in relation to the contracted study.)

**Objectives:** (Objectives express the purpose of the study in specific goals.)

**Reading Requirements:** (Reading is to be appropriate to the purpose of the contracted study.)

**Assignments:** (These may include seminar attendance, term papers, reading reports, daily journals, conducting interviews or group session, reflection papers, or any other assignments the professor and student negotiate as appropriate to the contracted study purpose and objectives.)

**Communication Agreement:** (The student must contract the professor at least once every two weeks during the contracted study time period. You are encouraged to do this by email exchange. Other options include office appointments, phone appointments, or other means deemed appropriate.)

**Contracted Study time period.** (The course must begin and end within three-months.)

Beginning Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

**Agreement between Professor and Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Professor: \_\_\_\_\_ Student: \_\_\_\_\_

Approval by D.Min. Department Chair \_\_\_\_\_ Date: \_\_\_\_\_

*A copy of this agreement MUST be recorded in the Doctor of Ministry office.*