

Course Contract

THEA 201- Practicum, THEA 481 Practicum
UND Department of Theatre Arts

For Department Use

Final Grade _____
Instructor's Initials- _____

Please fill out a separate contract for each Activity and/or Credit type

_____ Theatre Arts 201
_____ Theatre Arts 481

Personal Information

Name _____ Telephone _____
NAID Number _____ e-mail: _____
Major(s) _____
Minor(s) _____

Activity Information

Activity for which credit is to be earned _____

Describe the requirements for the above activity-

Supervisory Information

I was referred to this activity by- _____

The supervising instructor for this activity is- _____

I have contacted the supervising instructor to plan a schedule _____ Yes _____ No

Activity Time Line

I will begin this activity on or about _____

I will complete this activity on or about _____

I understand that this activity must be complete prior to Reading And Review Day. _____
(Initial)

I understand that I am allowed only one THEA 201 & one THEA 481 Practicum Credit per
Semester _____
(Initial)

Supervisor Signature _____ Date _____

Student Signature _____ Date _____