**Contract for Psychology 497, Senior Project**

**Course Description:** Individual investigation and APA-style report on a research project. Prerequisites: Twelve units of psychology and consent of instructor. Maximum credit six units. No more than 12 units of courses numbered Psychology 491, 494, 495, 497, 499 may be counted toward the major. **THESE UNITS ARE GRADED BY LETTER GRADE. PSY 497 IS OFFERED DURING SUMMER FOR 3 UNITS ONLY.**

**Directions:**
1. Complete this form with the assistance of the psychology faculty member who will supervise the study.
2. If you will be working at an outside agency, you must also obtain the signature of the agency representative who will serve as your field supervisor.
3. Submit this form, with appropriate signatures, to the Psychology Department Office LS-110 and obtain the restricted schedule number.

---

**NAME: ___________________________ RED ID: ___________________________

E-MAIL: __________________________ PHONE: ___________________________

**SEMESTER:**
- [ ] FALL
- [ ] SPRING
- [ ] SUMMER

YEAR: ___________________________

**UNITS:**
- [ ] 1
- [ ] 2
- [ ] 3

---

(Student Signature) __________________________ (Date) __________________________

---

**This section to be completed by the Faculty Supervisor:**

**Project Title:** ___________________________

1. Outline the expected student responsibilities (e.g., hours, tasks, meetings), including an approximate time commitment for each task. Describe how the student’s performance will be evaluated. ___________________________

2. Outline expectations for the APA-Style paper summarizing the student individual investigation. ___________________________

---

Will student be working at an off-campus field site?  [ ] Yes  [ ] No  **If yes, please fill out site information in the last section**

Will this project involve working with:
- [ ] Human Subjects
- [ ] Animal Subjects
- [ ] Archival Data

(Please check all that apply)

**Faculty Supervisor:**

(Faculty signature – Please Write Legibly) ___________________________

(Date) ___________________________

---

If you will be working at an off-campus Field Site, complete the section below.

**Field Site:** ___________________________

**Site Supervisor:** ___________________________

(Please print name and title)

**Address:** ___________________________

**Phone:** ___________________________ Fax: ___________________________ E-mail: ___________________________

**Site Supervisor Signature:** ___________________________ (Date) ___________________________

---

Rev 8-14-2012