

**HUNTER COLLEGE – CUNY
DEPARTMENT OF GEOGRAPHY
CONTRACT FOR INDEPENDENT RESEARCH**

Student's Name _____ ID _____

Faculty Sponsor _____ Semester _____

Course Number _____ Credits _____
GEOG, GTECH, PGEOG 791 or 792 or 793 only

TITLE or **TOPIC** of project (Please write a one page statement of intent below.)

STATEMENT OF INTENT (Be specific in your description of the project telling what you would like to do, why you would like to do it, and how you will go about achieving your goal.)

RECORD OF MEETINGS

Date Discussion/Progress/Comments

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Once this form is completed and signed by both the supervising faculty member and the student, the original copy must be brought to the appropriate advisor (Geography MA or GIS Certificate Program) and then to the Department of Geography office. Only then will registration permission be entered into CUNYfirst and the student allowed to register.

I agree to supervise this student's work as described

I will complete the work within the time constraints and parameters Imposed by my faculty advisor.

Faculty member's signature Date

Student's signature Date