

**HRD Honors Class Contract**  
**(to be filled out during the first week of classes each semester)**

Date: \_\_\_\_\_

**Student Information**

Name: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

UIN: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

**Course Information**

Course Prefix, Number, and Section: \_\_\_\_\_

Course Title: \_\_\_\_\_

Professor's Name: \_\_\_\_\_

**Description of Paper/Project**

Description: \_\_\_\_\_

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Due Date: \_\_\_\_\_

**Signatures**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Professor Signature

(Please return to Dr. Aynur Charkasova upon completion)