## **REC 761 GRADUATE PROJECT**

Name of Student	ID #
Graduate Major (check one) Recreation Managemen	tRecreational Therapy
Local Address	
EmailL	ocal Phone
Number of Credits (1-6)	
Suggested Topic	
Conditions of Agreement:  1. I am currently a graduate student and have read Graduate Catalog,  2. Project abstract is attached,  3. Expected date of completion for graduate projec  4. Student takes completed form to <b>Records and F</b> 5. I understand the continuous registration policy—  Once having completed all degree requirements thesis, seminar paper or the other culminating graduate semester for GRC 799 for zero credits and paying resident graduate credit) until the thesis, seminar	t isRegistration, 117 Graff Main Hall, in an approved program of study except the raduate projects, students must maintain cluding summer session) by registering eaching a special course fee (equal to cost of one
and receives final university approval.	
Signature of Student	Date
Signature of Graduate Project Advisor	Date
Signature of Graduate Program Director	Date
Original to Graduate Project Advisor Copy: RMRR Graduate Program Director Student CSH Assistant to the Dean, 105 Graff Main Hall Records and Registration, 117 Graff Main Hall	