

RESEARCH ASSOCIATE (One or Two Credits) Registration Form

Please Select the Expected Credit: One (1) Credit	Two (2) Credits
Student Name:	Student ID #:
Student FAMU E-Mail Address:	Telephone No.:
Indicate Semester and Year of Research Associate Project: FALL_	SPRING SUM
Name of Faculty Supervisor:	
Service as a Research Associate is intended to serve as a substa students are provided the opportunity of in-depth research and study the supervision of a faculty expert. This form must be completed if y Associate for a member of the FAMU College of Law faculty. The faculty a Research Associate must also sign the form. You and your faculty su of credits you expect to receive ("Expected Credit") at the time of regis credit Research Associate option, you must complete an average of the assigned by your faculty supervisor. The two credit option requires a week of research. Academic credit is assigned on a pass/fail basis. St form of compensation. At the end of the semester, your faculty satisfactorily completed the research projects assigned to you.	into a particular area of law under you intend to serve as a Research ty member for whom you serve a spervisor must specify the number tration. If you register for the one en hours per week of research a et an average of fifteen hours per udents may not receive any othe
Signatures of both student and Professor indicate that we ag Research Associate for said Professor during the semester indicated bel shall make regular assignments of substantive research projects th Student shall keep and submit accurate record of all time devoted to the maintain records of assignments and work product for a period of at le end of the semester in which the research is performed. Student and basis to discuss the research project. At the end of the term, Professor indicating whether Student has satisfactorily or unsatisfactorily comple	ow. We understand that Professo roughout the semester and tha e research project. Professor sha ast three academic years from the Professor shall meet on a regular shall assign a grade of "S" or "U"
Student Signature:	Date:
Faculty Supervisor Signature:	Date:
Academic Dean's Signature:	Date:

After you have obtained all signatures, submit this form to the Registrar's Office. You will be assigned a permission number to conduct your registration for this course and must also select the number of credits in iRattler as specified (one or two) above.