

Date Submitted _____

Engineering Workshop Participation Contract Fall 2014

Name (Print) _____

PeopleSoft: _____

Phone: (Prefer Cell) _____

Major _____

UH Email _____

Alternate Email: _____

I understand that I have been selected to participate in the _____

_____ Workshop and that my full cooperation is required to maintain my enrollment status.

I also authorized the release of my course grades to the workshop facilitator and assistant throughout the semester. I understand that my grades will be kept confidential and that they are to track my progress.

I know I am expected to read the class material before class, take good notes, attempt homework problems before workshop, work in groups during workshop, and participate in workshop activities. I know that the expectation is for me to follow as close as I can the Guaranteed 4.0 study methods to help me do my best in the class and workshop. The next showing of the program will be September 5th and 6th, 2014.

I understand that I am expected to attend all workshops and lectures. Excuses for missing workshops must be obtained from workshop facilitator or assistant before the workshop. Having work to do for another class is not an excusable reason to miss a workshop.

I understand that this workshop will be for a 1 hour credit on my PeopleSoft account. I also understand that the grade for this class will be SATISFACTORY (S) or UNSATISFACTORY (U). I also understand my attendance to the workshop will be a major factor in my grade. I additionally understand that, if I have four unexcused absences from the workshop, I will be dropped and receive an unsatisfactory (U) grade for the workshop. Additionally, I understand that dropping that class does not drop me from the workshop.

Is this your 1st, 2nd, 3rd attempt in taking this class? 1st 2nd 3rd attempt (circle one)

Signature: _____

List the number of hours you plan to take this semester: _____

List the number of hours you plan to work per week: _____



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I have read and understand the conditions of this Authorization for Use of Image, Voice, Performance, Artwork, or Likeness.

_____ Signature	_____ Date	_____ Age (if minor)
_____ Printed or typed name	_____ Phone	
_____ Address	_____ City/State/Zip	

CONSENT OF PARENT/LEGAL GUARDIAN REQUIRED IF ABOVE INDIVIDUAL IS A MINOR.
I am the parent and/or guardian of the above minor and hereby consent and agree to the foregoing terms and provisions on his or her behalf.

_____ Signature	_____ Date
_____ Printed or Typed Name	_____ Phone
_____ Address	_____ City/State/Zip

Note: Modification of this Form requires approval of OGC

PLEASE MAKE SURE YOU SIGN THIS FORM!

ADD/DROP FORM

Date _____ (PLEASE CLEARLY PRINT ALL INFORMATION EXCEPT SIGNATURE) Semester: Fall 20 _____

PeopleSoft ID _____ Spring 20 _____

Major _____ Summer 20 _____

Classification based upon total credit hours (freshman, sophomore, etc.) _____

Last Name _____ First Name _____ Middle Initial _____

Email Address _____ Phone Number _____ Alternative Phone Number _____

#	Add/Drop	Dept. Name	Course Number	Class #	Day & Time	Course Description
	Ex: Add	Ex: MATH	Ex: 1431	Ex: 25698	Ex: TH 3-4:30	Ex: CHEE 2331 (CHEM Process)
1	ADD	EGRP				
2						
3						
4						
5						
6						
7						

Signature: _____ Date: _____

IMPORTANT: Math/Science workshops must be arranged at www.sep.uh.edu.