New Media Communications
Special Projects Agreement (NMC 401—NMC 408)

Student MUST complete a two-page paper describing their NMC 401—408 topic. This paper should also include learning objectives and responsibilities to faculty. All signatures on this form are required prior to registration.

Student
Last Name ____________________________________ First Name ____________________________________ M.I. _____
OSU ID # ___________________________ Major ___________________________ OSU Email ___________________________
Class Standing: Soph ___________ Junior ___________ Senior ___________ Grad Student ___________
Address ____________________________________________________ Telephone ___________________________
Permanent Address ___________________________________________ Telephone ___________________________

Course Information
NMC 401- NMC 408 _______________ Credit Hours _______________ CRN ___________________________
Starting Date _______________ End Date _______________
Proposed Project ______________________________________________________________________________

University
Faculty Supervisor ___________________________ Telephone ___________________________
Email __________________________________________

Student’s Learning Objectives (To be completed by student: position duties, relation to major, media, career goals, etc.)
1. ______________________________________________________________________________________________
2. ______________________________________________________________________________________________
3. ______________________________________________________________________________________________

Student Responsibilities to Faculty Supervisor (Dates for meetings, reports, papers, etc.)
____________________________________________________________________________________________

Required Signatures
Student ___________________________________________ Date ________________
Faculty Supervisor ___________________________________________ Date ________________
Advisor ___________________________________________ Date ________________

RETURN TO NMC OFFICE FOR REVIEW
Approved ☐ Not Approved ☐

NMC APPROVAL (Dan Faltesek): ___________________________ Date ________________

8/31/17