

PROJECT DESCRIPTION

This contract can be submitted in person to the CSB Undergraduate Office (RW424) with original signatures or electronically to janet.mannone@utoronto.ca with typed signatures. Keep in mind that a **typed signature will be deemed equivalent to an original signature.**

Student Name:	Student Number:
Email Address (utoronto address only):	Phone Number:
Student's Signature:	Date:

Supervisor's Name:	Email:
Supervisor's Signature:	Date:
Supervisor's Name:	Email:
Supervisor's Signature:	Date:

Departmental Approval:	Date:
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If at any time you feel that any aspect of this contract is not being fulfilled, please contact the Associate Chair for Undergraduate Affairs, Prof. Melanie Woodin, (416) 978-8646, m.woodin@utoronto.ca, RW 303.

