

**Late Start / Spring, 2001**  
**August 20 – December 18**

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Course Name \_\_\_\_\_

Work Phone \_\_\_\_\_

Section# \_\_\_\_\_

Instructor \_\_\_\_\_

<b>Beginning of Term</b>	<b>End of Term</b>
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**Please Date and Initial**

COMPLETED  
**92 SERIES CONTRACT** \_\_\_\_\_

ASSIGNED ACTIVITIES  
AND DUE DATE

Scheduled Appointments

SPECIFIC ACTIVITIES ARE  
LISTED ON THE ATTACHED  
FORM.

1<sup>st</sup> Appointment \_\_\_\_\_

DUE DATE: \_\_\_\_\_

1<sup>st</sup> resch. appt. \_\_\_\_\_

2<sup>nd</sup> resch. appt. \_\_\_\_\_

\_\_\_\_\_ Verified Grading Appointment

1<sup>st</sup> Follow Up Appt. \_\_\_\_\_

2<sup>nd</sup> Follow Up Appt. \_\_\_\_\_

\_\_\_\_\_ All work submitted on time

Grading Appointment \_\_\_\_\_

\_\_\_\_\_ TOTAL DAYS LATE

1<sup>st</sup> resch. appt. \_\_\_\_\_

Received by: \_\_\_\_\_

2<sup>nd</sup> resch appt. \_\_\_\_\_

Student Signature: \_\_\_\_\_