Project Mentor/Student Contract

STUDENT:			NOBTS-ID:		
TELEPHONE:		E-M	lail:		
SPECIALIZATION:			SEMESTER:	YEAR:	
PROJECT MENTOR: (PLEA	SE PRINT)				
2.) Submit the 1 The Project Mentor sho 1.) Comment o 2.) Sign and da	e above information form to the Project uld: In the proposed prote the form, and the other of Profession of Profession in the Office of Profes	on and the first second Mentor. Dject, and then Dject and then Djectoral	ction below, and ther Programs.		mentor and the student.
Briefly describe the prop	oosed Project in Mi	nistry:			
Project Mentor's Comme	ents:				
Associate Dean's Comm	ents:				
${ m I}_{m{\prime}}$ Print Project Me	entor's Name	_, agree to serve	e as the above nan	ned student's Proje	ct Mentor during
the Project in Ministry through the Exit Inter		ner program fror	n the submission o	f the Preliminary P	roject Proposal
Professor	DATE	DIVISION	E-Mail		
ASSOCIATE DEAN		Date			

Note: Forms may be mailed or scanned as an e-mail attachment and sent directly to your project mentor. Completed forms should be returned to:

The Office of Professional Doctoral Programs 3939 Gentilly Blvd.

New Orleans, LA 70126 E-mail: <u>prodoc@nobts.edu</u>