

Discovery Undergraduate Interdisciplinary Research  
Internship (DUIRI) Learning Contract

Student Name: \_\_\_\_\_  
Last First

Student Email Address: \_\_\_\_\_

Major/Year: \_\_\_\_\_

Faculty Advisor Name & Email: \_\_\_\_\_

Graduate Mentor Name & Email: \_\_\_\_\_

Title of DUIRI Project: \_\_\_\_\_

Term (Spring, Summer, Fall): \_\_\_\_\_ Year: \_\_\_\_\_

1. Research Project Objectives (Measurable outcomes during and/or at completion of this DUIRI project):
  
2. Research Activities (Describe what student will do to meet these objectives):
  
3. Assessment (How the student's work will be assessed by the faculty advisor):
  
4. Approximate schedule of meetings with faculty advisor, graduate mentor, and/or research group:

I understand and agree to meet the requirements of our DUIRI project for this semester.

Signatures:

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Instructor Date

Scan & email completed, signed form to:

- 1) Instructor (Faculty Advisor or Grad Mentor)
- 2) DUIRI administration (kmmitsch@purdue.edu)