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| --- | --- |
| Student Name: | Mentor Name: |
| G# | G# (needed for stipend payment) |
| Email: | Mentor Signature/Date: |
| Phone: | Email: |
| **Contract Agreement:** | Phone: |
| Dept: MSN: |
| I hereby agree to complete satisfactorily (grade of C or better) the below courses as a part of the requirements of the George Mason University Bachelor of Individualized Study Degree. I will not vary from this mutual agreement without written approval of my faculty advisor and the Director of the BIS Program.Student Signature/Date:  | Position status, please check one:Admin Faculty Adjunct FacultyPlease include your home address and phone on page 2Full‐time Faculty Other: |
| **BIS Notes to Registrar’s Office:** |
| **Concentration Requirements:**34 – 46 semester hours (including required BIS courses). At least 25 hours must be upper‐division (300, 400, 500, or 600 level; max 6 hours 500‐600 level) and 25 credits must be from George Mason University. No more than 9 transfer credits can be included in the concentration. The concentration courses must not include general education course requirements. Courses already completed or in progress may be included. It is the student’s responsibility to be sure that all prerequisites are met before taking the courses listed.**\*\* In order to graduate all students must meet Mason’s requirement of 120 total credits and 45 upper‐level credits.\*\*** |
| **Concentration Title:****(max 50 characters)** |
| **Course Prefix/ Course Title Credit Institution Number Hours**1. **BIS 300 Understanding Interdisciplinary Studies 3 GMU**
2. **BIS 390 The Research Process (prerequisite BIS 300 and approved Educational Contract) 3 GMU**
3. **BIS 490 Senior Project (prerequisites BIS 300 and BIS 390) 4 GMU**
4. **BIS 489 Directed Readings/Research (optional) GMU**
5. **BIS 495 Internship/Career Practicum (optional) GMU**
6. **UNIV 304 BIS Transfer Transitions (recommended) 1 GMU 8**

**9****10****11****12****13****14****15****16****17****18****19****20** |
| **(Please list alternative courses on back) Total Concentration Hours: (34‐46 hours)** |
| **Signature of BIS Director: Date:** |

**Alternative Courses:** Below you should list alternative courses that can be taken if, for reasons beyond your control, you are unable to take one or more of the concentration courses listed on the front of this form.

Alternative courses should be from the same discipline or academic focus as the courses for which they substitute (PSYC for PSYC, social science for social science, etc.).

At least one alternative is suggested for each concentration discipline.

Should it become necessary to use an approved alternate course, you must contact a BIS academic advisor to initiate the substitution. Changes in this Educational Contract other than the above approved alternate courses require a BIS Contract Amendment. Contract Amendments require the signature of your BIS Faculty Mentor and must be approved by the BIS Director.

**Approved Alternative Courses:**

**Concentration Discipline 1:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Course Prefix/Number** | **Course Title** | **Credit Hours** | **Institution** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |

**Concentration Discipline 2:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Course Prefix/Number** | **Course Title** | **Credit Hours** | **Institution** |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |

**Concentration Discipline 3:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Course Prefix/Number** | **Course Title** | **Credit Hours** | **Institution** |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
|  |
| **For Adjunct Faculty Members:** Please provide your home address and phone number so that we may contact you with necessary forms and other items.Street Address: |
| City/State/Zip: | Phone: |  |  |
| **\*\*To register for BIS 490 and BIS 491, all concentration credits must be completed or in‐progress (maximum of 6 in‐progress credits)\*\*** |