# Learning and Advising Contract

Name _____ Mills ID _____ Email _____

Spring Fall 2008 2009 2010 2011

Semester at Mills 1 2 3 4 5 6 7 8 Semesters to Graduation (including this one) 1 2 3 4 5 6 7 8

## Goals

**Long Term** (*Why are you in college? What do you want to be "when you grow up"? What are we working towards here?*)**:**

**Short Term** (*What do you hope to accomplish this semester? What are your performance targets? How do your immediate goals fit into your overall educational trajectory? Why these courses at this time?*)

## Academic Activities undertaken this semester for credit

| Dept | Course Number | CRN | Section | Course Title | Instructor | Pass/ Audit | Credits |
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## Other Activities *(What other things (work, extracurriculars, family, etc.) will you be doing this semester that contribute to your education, round out your life, and/or compete with your schooling?)*

## Criteria for Evaluation *(How should we evaluate this semester both as a satisfactory educational experience for you and as a satisfactory performance by you.)*

## Signatures

_____ _____ _____ _____

Student Date Advisor Date