

INDEPENDENT RESEARCH PROJECT CERTIFICATION FORM

Name of Student \_\_\_\_\_ Yr \_\_\_\_\_

Title of Project \_\_\_\_\_  
\_\_\_\_\_

Semester in which work began \_\_\_\_\_

Semester in which work completed \_\_\_\_\_

To be completed by the student:

I have submitted a signed contract including all of the relevant requirements detailed in Academic Regulation III.C. I have attached a signed copy of the executed contract to this certification.

Number of credit hours for this project

Hours spent on this project

Date: \_\_\_\_\_

Student signature/e-signature: \_\_\_\_\_

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To be completed by the professor:

Project meets all contract conditions

Project satisfies Vermont Law School's Credit Hours Policy

Final grade for project

Date: \_\_\_\_\_

\_\_\_\_\_  
Professor's signature or e-signature

(e-signature will be accepted if sent from the professor's official VLS email)

\_\_\_\_\_  
Title

Once completed, please return this form to the Registrar's Office by the usual final grade deadlines.