

MEDICAL STUDENT SPECIAL ELECTIVE LEARNING CONTRACT

Student Name: _____

Instructor: _____

Title of Elective: _____

Learning Objectives
(What I intend to learn)

Strategies
(Specific processes for achieving
my objectives)

Evaluation Methods
(How my progress regarding each
objective will be measured)

Closing Activity
(Describe final project/activity
different from ongoing
evaluation methods)

The instructor and the student jointly design the learning contract and are expected to stay in regular contact during the elective for guidance and evaluation.