Noyce Scholar: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Development of a working relationship with each of your instructors, feeling comfortable going to them for help, and not being embarrassed to reveal to them that you do not understand something are important to your success in your coursework. As part of the required activities for Noyce scholars, you must complete this assignment for **each math or science course in which you are enrolled**.

INSTRUCTIONS TO SCHOLAR: You are to contact the instructor, introduce yourself to the instructor, and make an arrangement to meet with the instructor during office hours during the first half of the semester. **When you visit those office hours, you either must bring your most recent test (or quiz) and discuss your errors or come prepared to ask at least three specific questions about course material that you did not understand fully** (and seek clarification of that material). You must do this twice during the first half of the semester for each math or science course. Have the instructor sign a copy of this form and bring it to Dr. Adams or Dr. Larkin during your monthly meetings with the Noyce Cohort.

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| **A NOTE TO THE COURSE INSTRUCTOR:**Noyce Scholars are required to meet with their course instructors during the first half of the semester. They are to contact you ahead of time to arrange to meet with you during your office hours (or some other mutually-acceptable time). During that meeting, the scholar is to bring a recent quiz to discuss his/her errors or else must come prepared to seek clarification of at least three specific points from the course material that he/she did not understand. Your signature below affirms that the student made an arrangement to meet with you, has met with you, and came prepared to engage in a discussion of course materials. |

Instructor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_