

INDEPENDENT STUDY PROPOSAL FORM

Please be advised that undergraduate students must have completed at least 60 credits, and be in good academic standing to be eligible for Independent Study course work. Additionally, only 12 credits of Independent Study course work are normally allowed toward degree requirements.

Last Name:	First Name:	Student ID:
Program Major:	Concentration:	
E-mail:	Home Phone: ()	Cell Phone: ()
CGPR CUM. CF	TO BE COMPLETED BY INDEPENDENT STUDY CRECKEDITS COMPLET	DENT REDITS
Course applicable to: (Check one)	Major elective Other (specify)	Free elective (specify course)*
COURSE NUMBER:	COURSE CODE:	(specify course)* No. of Credits:
	COOKSE CODE.	
STATEMENT OF PROBLEM:		
GOAL OF PROJECT:		
DESIGN AND METHOD:		
How often will student and mentor meet?Please be advised that the grade deadline for IndDEALINE FOR INDEPENDENT STUDY REC	dependent Study courses is the term's fin	al day of classes, unless noted otherwise here:
Student's signature:		Date:
Mentor's signature: FDUV Coordinator FDUV Provost Chairperson's signature: Dean's (or designee's) signature:	APPROVAL S	Date: Date: Date: Date: Date: Date: Date:
Payroll: Director of Enrollment Services: Scheduling:	Office Us	Date: