

## Independent Study Proposal Form

## Vancouver Campus

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: ()	
CGPR CUM. C	TO BE COMPLETED BY RECORDS OF INDEPENDENT STUDY CREDITS COMPLETED	CHECKED BY:
Course applicable to: (Check one)	Major elective Other (specify)	Free elective (specify course)*
COURSE NUMBER:	COURSE CODE:	No. of Credits:
	Mentor:	
STATEMENT OF TROBLEM.		
GOAL OF PROJECT:		
DESIGN AND METHOD:		•
		sses, unless noted otherwise here:
DEALINE FOR INDEPENDENT STUDY REC	GISTRATION: End of fourth week of Summer/Fall/W	Vinter Semester
Student's signature:		Date:
	APPROVAL SIGNATURE	S
Mentor's signature:		Date:
FDUV Coordinator:		Date:
FDUV Executive:		Date:
Chairperson's signature:		Date:
Dean's (or designee's) signature:		Date:
Payroll:	Office Use Only:	Date:
Director of Enrollment Services:		Date:
Scheduling:		Date: