Independent Study Approval Form
GRADUATE

Spring [ ]
Summer [ ]
Fall [ ]

Year _____

Please enroll me: Yes No

_____ _____ _____
Last Name First Middle

SO #: _____

E-mail Address: _____

Date: _____

Independent study is allowed only in the student's major field. Permission must be obtained from the major advisor, instructor of the study, and the Dean of Graduate Studies. This form must be returned to the Graduate Office for enrollment.

Independent Study in:

_____ _____ _____
(Field of Study) (Course Number) (Cr.)

Tentative Title: _____

_____ _____
(Student) (Dean of Graduate Studies)

_____ _____
(Major Advisor) (Department Chairperson)

_____
(Instructor)