Authorization for Independent Study

Students must submit this form to the professor overseeing the independent study for approval prior to registration for Independent Study. Complete all items below including two signatures of approval. Students should retain a copy of this completed form for their records and the original should be submitted along with any supporting documents to the graduate program manager.

<table>
<thead>
<tr>
<th>Name</th>
<th>Semester</th>
<th>Year</th>
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PID:

Faculty Member:

Reason for Independent Study rather than scheduled course:

Through what tangible product will student learning be demonstrated? (e.g., paper, report, etc.)

Grade will be based on the following criteria:

Description of program of study:

Number of Credits:

_________________________________  _____________________________________
Student Signature                  Faculty Name (Please Print)

Approved:

_________________________________  _____________________________________
Faculty Signature                  M.A. or PhD director