

**College of Arts and Sciences
Independent Study**

_____ Semester, _____

Semester hours of independent study _____

Graduate or undergraduate _____

Name of Student _____ Student ID#: _____

Address _____ Telephone#: _____

Advisor _____ Department _____

- I. Statement of Advisor (to be attached) Objectives of project, methods and/or materials involved, estimated time to counsel with student/week, educational value to student, reasons for advising student to initiate independent study, methods of evaluating project, other information that you consider pertinent/relative to this project.

Do you expect this project to culminate in a published Paper? _____ If so, in what journal? _____

- II. Students' statement of objectives of this independent study (to be attached). This should include the problem to be solved and an outline of the proposed methods to be used. What is the reason you decided to do this independent study? Approximately how many hours/week will you spend on this project? _____

Student _____ Date _____

Advisor _____ Date _____

Department Chairman _____ Date _____

Distribution: Student
Advisor
Department Chairman (Student file)