

INDEPENDENT STUDY PROPOSAL FORM

MUST BE SUBMITTED 4 WEEKS PRIOR TO THE START OF THE TERM

Name		Student I.D.	Date
Email		Term	
INFO799 Number of ca	redits proposed:	(2 to 12 credits)	
Brief title of project (to	appear on transcript):		
		(Maximum 30	characters and spaces)
		e methods proposed for gathering data of funded research project, include account	r information. Attach an additional sheet if number.
who has agreed to superv	ise the project, the stude		ent must secure signatures of the faculty member n. If the project requires work in or cooperation thorized to speak for that agency.
Approved by:		/	Date
	Instructor (Print)	Instruct	or (Sign)
Approved by:		Advisor	Date
Approved by:	Associate Dean/Director Doctoral Program		