

I. TO BE COMPLETED BY STUDENT:

Semester for which you wish to receive credit (Please mark year in appropriate box):

TERM	AUGUST	FALL	SPRING	BARD
YEAR				

Name/ID#: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Credits you have already earned through independent study \_\_\_\_\_

Credit requested for this independent study \_\_\_\_\_

Method of Grading (circle one): LETTER GRADE PASS/FAIL PASS/FAIL WITH COMMENTS

Attach a detailed description (typewritten) of your proposed project, including a bibliography if appropriate. Explain how this project relates to your primary academic concerns.

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_

II. TO BE COMPLETED BY FACULTY SPONSOR:

Please comment on the proposed project's feasibility and validity:

Explain on what basis the project will be evaluated:

Faculty Sponsor's Name (Please Print) \_\_\_\_\_

Faculty Sponsor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

For use by the Graduate Committee only:

Request was: (Circle one)	APPROVED	DENIED
Committee Member's Signature	Date	

