

GRADUATE INDEPENDENT STUDY CONTRACT
College of Arts, Sciences, and Letters

Env Science _____ MALS _____ Math _____ Psychology _____ Public Policy _____ MPA _____

Student's Name _____ Student ID Number _____

Address _____ Phone (Home) _____

City _____ Zip Code _____ email _____

Course Name _____ Course No. _____

Contact Hours Each Week _____ Term _____ Credit Hours to be Elected _____

Area to be Studied _____

Work to be completed _____

Method of Evaluation (e.g., examination, term paper) _____

Student Signature _____ Date _____

Faculty Signature _____ Date _____

Program Director _____ Date _____

Faculty Department Chair _____ Date _____

After form is completed and signed by the student and all faculty members, please forward to the CASL Graduate Programs Office, 1080 SSB. **The student must then register for the course in person at Enrollment Services with an authorization slip provided by the CASL Graduate Programs office or faculty member.** Copies of this contract will then be sent to the appropriate individuals. If the contract is submitted after the specified period to add courses, a petition to override the deadline must accompany it.