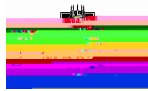


Enrollment in an Independent Study Course 6995-Graduate School of Management

Purpose: Used ONLY by Graduate School of Management students to request enrollment in a course whose mode of instruction offers the student an opportunity to study or research



Enrollment in an Independent Study Course 6995-Graduate School of Management

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Section 3: Student Information

Name

Last name, First name, Middle name _____

MUID _____

Section 4: Independent Study Course Proposed Outline

Instructor's Name _____

Instructor's MUID _____

Proposed Course Outline (include required outcomes, timetables and grading criteria). Attach additional pages if necessary.

Section 5: Student Statement/Signature

I am aware of the number of hours per week that this Independent Study requires, and I will work that number of hours. If I become unable to work that number of hours, I will notify my department to have my credits can be changed appropriately.

Signature of Student _____

Section 6: Instructor and Dept. Chair or Director of Grad. Studies Signatures

Signatures below verify that this Independent Study will be conducted in accordance with the contact hour requirements of the University Scheduling policy and will be utilized as defined in the purpose above.

Signature of Instructor _____

Signature of Dept. Chair or Director of Grad. Studies _____

Section 7: Graduate School of Management Approval

Signature below verifies that this Independent Study will be conducted in accordance with the contact hour requirements of the University Scheduling policy and will be utilized as defined in the purpose above.

Signature of GSM Office _____