Department of Transnational Studies

INDEPENDENT STUDY/DIRECTED READINGS APPROVAL

Directions: Any graduate or undergraduate student who intends to enroll in an independent study course is required to develop a specific study proposal and secure the assent and signature of the faculty member under whose guidance and supervision the student wishes to study. After completing all areas of this form, submit it, together with the required addendum (see below), to the Graduate Studies Secretary in Room 1010, Clemens Hall for processing.

NOTE: The Department will thereafter register you for the appropriate independent study section and send you a confirming e-mail. You can also check your class schedule via MyUB site to confirm registration.

Section I – To be completed by student

Study Level: Undergraduate ________   Graduate ________

Semester: Fall ________  Spring _______  Summer ________  Year _________

1. Student Name: __________________________________________________

2. Person Number: _______________________

3. Student e-mail address: ______________________________

4. Name of Faculty Member: _____________________________________________

5. Course number: _______________

6. Number of credit hours: ______

Section II – To be completed by student and reviewed by faculty member

Addendum: academic work to be done on which the course grade will be based. NOTE: You must attach an Addendum to this form that specifies the following:

(a) A statement describing clearly and precisely the topic of the study proposal
(b) The frequency and total number of meetings to be held with the faculty member
(c) Number and length of written assignment(s)
(d) A preliminary bibliography of key readings relevant to the topic of the study proposal
(e) Any other assignment(s) mandated by the faculty member
Section III – To be completed by faculty member

Comments (Note: If student is using this independent study course in lieu of another course, please indicate the course number of that course)

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Section IV – To be completed by student and faculty member

Signatures

Student Signature: __________________________________________  Date: _______________

Faculty Signature: ___________________________________________ Date: _______________