REQUEST FOR INDEPENDENT STUDY IN MATHEMATICS

 MTH

Completion of the form is necessary prior to registration in any Mathematics course which is to be taken on an independent study basis. The original must be kept on file in the Department of Mathematics. A copy will be provided for the instructor and another for the student. The form needs to be signed by the student, instructor and Chair of the Department of Mathematics. After all signatures have been secured, the Academic Office Coordinator will complete the necessary registration permit form for the student. If the amount of room provided below is insufficient, place your comments on the reverse side. PLEASE TYPE OR PRINT LEGIBLY

NAME: STUDENT NUMBER: DATE:

CLASS: Fr So Jr Other GPA in Math

Previous Math Courses:

Proposed Area of Study:

Text or other materials: Credits

Times and days met with instructor:

Major objective in taking the course:

If Departmental approval is necessary, provide a justification for taking this course.

Student’s signature: Date:

\*\*\*The remainder of this form is to be filled in by the instructor\*\*\*

Describe the nature of the course:

Describe how the student is to be evaluated:

Instructor’s signature: Date:

Chair’s signature: Date: