

INDEPENDENT STUDY / DIRECTED RESEARCH CONTRACT

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

U#: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

Course:   0  /  ( \* 1 , ' 6  
Credit Hours: \_\_\_\_\_  
Semester: \_\_\_\_\_  
Faculty: \_\_\_\_\_

Describe your Project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you taken an Independent Study or Directed Research course previously? If so,  
Semester/Year: \_\_\_\_\_  
Credit Hours: \_\_\_\_\_  
Faculty: \_\_\_\_\_

Note: Hours earned as Independent Study credit may only be used towards