Application for Independent Study, Independent Research, Directed Study

	his form may not be submitted electrequired signatures to the Registration		
Undergraduate	☐ Graduate		
DU ID:	Name:		
Name of Instructor:	Subjec	ct/Course #:	
Term:	Year:	Credit Hours:	
Title of Project:	(limit 27 characters for permane	ent record)	
STUDENT SIGNATURE I have read all the req	uirements and regulations listed	on the back of this form.	
			Date

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Independent Study

Independent study provides opportunities for the capable student to do special work under individual supervision in areas not