 **Independent Study Form**

**Registration Services**

847.866.3905 | registrar@garrett.edu | 2121 Sheridan Road | Evanston, Illinois 60201 | 800.SEMINARY| www.garrett.edu

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| Student's Name: |       | Professor's Name: |       |
|  Degree: |       | Date:  |       |
| Grade Type: (LG or P/F) |       | Semester hours: |       |  |
| Student's Signature: |       | Professor's Signature:  |       |

(sending from .edu e-mail address constitutes signature)

|  |  |  |
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|  Semester & Year |  Course # | Course Title: *Courses offered during the academic year may not be taken as independent study* |
|       |  [ ] -699 (masters) [ ] -799 (DMin) [ ] -999 (PhD) |       |

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| Course goals:       |
| List course requirements:       |
| Dates (minimum of 4 meetings): | 1 |       | 2 |       |  |
| 3 |       | 4 |       |  |
| Bibliography:      |

Copies: office, student, professor INDEPENDENT STUDY.frm Nov-23