Graduate Independent Study or Tutorial Study Request Form

Students wishing to enroll for an independent study or on a tutorial program basis must submit this completed form with all required signatures to the ***Registrar's Office.*** Please read the following definitions and complete the appropriate section. You may view completed registrations on web advisor online. Check with the Registrar's Office for registration deadline.

Name_____ ID_____

Address _____ Phone#_____
Street and Number *City/State/Zip*

Student Signature _____
I accept full financial responsibility for my CLU enrollment, including interest that may accrue on any unpaid balance.

Instructor's Name _____

Reason for Request _____

(A)

INDEPENDENT STUDY REQUEST

Research in an area not covered by courses listed in the CLU catalog and always recorded as (dept)_____590_____
Students may enroll in 1-4 credits with approval of their instructor.
Students are required to submit an outline of their proposed independent study with this completed form to the Registrar's Office within 15 Days after the start of the semester.

TOPIC OF STUDIES: _____CREDITS (1-4) _____
(Check One)
Course of Study CSC Education MBA MPPA Psychology
(Check One)
Semester Term I-Fall Term II-Winter Term III-Spring Term IV-Summer Year 200_____

(B)

TUTORIAL STUDY REQUEST

Courses listed in the catalog but not scheduled in a given semester- Recorded with same title, course number and credits.
Note: The Dean of the School of Education must approve and courses which are applied to a credential.

I WISH TO COMPLETE THE FOLLOWING CLU COURSE ON A TUTORIAL BASIS.

COURSE NO._____ TITLE_____ NO. OF CREDITS (1-4)_____
(Check One)
Course of Study CSC Education MBA MPPA Psychology
(Check One)
Semester Term I-Fall Term II-Winter Term III-Spring Term IV- Summer Year 200_____

Approved Yes No _____ Date_____
Instructor

Approved Yes No _____ Date_____
Program Director

Approved Yes No _____ Date_____
Program Dean