EASTERN MICHIGAN UNIVERSITY

Department of History and Philosophy

INDEPENDENT STUDY CONTRACT

(This is an internal form only)

Independent Study is intended to provide opportunities for individual exploration beyond existing course offerings. It may NOT be used to circumvent taking regularly scheduled courses.

Independent Study in Philosophy is subject to approval by the Section Chair, Graduate Coordinator (for graduate students), or Undergraduate Advisor (for undergraduates).

Independent Study in History is limited to a maximum of three credit hours during any one semester or session. Graduate registration is subject to the approval of the Graduate Coordinator, and undergraduate registration is subject to approval by an Undergraduate Advisor.

In the absence of the Section Chair, Undergraduate Advisor, or Graduate Coordinator, registration may be approved by the Department Head.

Registration

1. Secure the agreement of the professor who will supervise your project. Your professor should complete this section.

Give a brief description of the proposed Independent Study Project:

List all assignments and the dates by which they are to be completed. (The number of assignments should be determined by the professor. In lieu of completing this section, you may attach a list of assignments or a course syllabus.)

1) _		
, -	Assignment	Due date
2) _		
, -	Assignment	Due date
3) _		
, -	Assignment	Due date

4)				
Assignment			Due date	
5)				
Assignment			Due date	
6)				
Assignment			Due date	
Semester and Y (*If Summer, please inc		Gradu	ate or Undergraduate Credit	
Signature of Professor	Printed Name			
2. Sign and date this f	orm.			
I agree to complete all	work by the dates specified above	Э.		
Signati	ure of Student	Date	EID#	
Printed N	Name of Student	Emich Email Address		
study to be used on a do	: Graduate school regulations allow egree program. of independent study already taken of independent study hours sought	:	(6) hours of independent	
3. Secure the approva (See above.)	l of the Section Chair, Undergrad	luate Advisor, or (Graduate Coordinator.	
Signature of Section Ch	nair, Undergraduate Advisor, Gra	 duate Coordinato	r, or Department Head	
 Secure electronic p information below. 	ermission (override) from a Depa	rtment Secretary,	, who will fill in the	
Course Title	CRN #	Section #	Professor's Name	