

GRADUATE INDEPENDENT STUDY AUTHORIZATION FORM

Patti and Rusty Rueff School of Design, Art, and Performance - Purdue University

Instructions: Fill out both pages completely with signatures,
then email forms to Minde Freischlag, Graduate Program Assistant: mfreisch@purdue.edu.

Student Name:

Student I.D.#

Area of Specialization:

I request permission to enroll in AD:

Course title

(abbreviated course title: maximum 30 characters and spaces)

Number of credits (1-6):

Semester:

Year

Brief description of independent study project (if a substitution or replacement for another course, please explain)

Student Signature

Date

I am willing to guide the independent study outlined in the attached prospectus.

Independent Study Professor Signature

Date

Graduate Program Coordinator Signature

Date

GRADUATE INDEPENDENT STUDY PROSPECTUS

Patti and Rusty Rueff School of Design, Art, and Performance - Purdue University

Student Name:

Student I.D.#

FULL TITLE OF STUDY

PURPOSE AND OBJECTIVES

PROCEDURES

OUTCOMES (tangible results)

PROPOSED TIMELINE (schedule)