

Petition for Two-Unit Independent Study

Student Name: _____ CWID: _____

2L 3L Current Cumulative GPA: _____

School year and semester study proposed for: _____

Supervising Faculty Member: _____

Final paper to be submitted no later than: _____

Prior to submission of this petition to the faculty member for approval, attach both:

1. A statement of why you want to undertake the proposed independent study.
2. A detailed outline of the proposed study.

Please refer to the [Academic Policy, section 7](#), for additional information on Independent Studies.

Student's Signature

Date

Approval, Supervising Faculty Member

Date

Please note this petition does not enroll you in the 2 unit Independent Study course. Please return this completed form to the Dean's Suite to receive approval. Upon approval, you will be registered by the Office of Student Information and Services.

Approval, Academic Dean

Date

Received by

Date

Action by the Office of Student Information & Services:

Processed by

Date