



APPLICATION FOR INDEPENDENT UNDERGRADUATE RESEARCH OR CREATIVE INVESTIGATION COURSE CREDIT

Date: _____

Student ID # _____

Student Name _____
Last First Middle

Class Level: (Check One)

Freshman Sophomore Junior Senior

Semester:

Fall Spring Semester Year _____

Department _____ Number of Credit Hours _____

Course Number and Title _____

Brief Description of Project _____

Student's Signature _____ Date _____

Instructor Name (*please print*) _____

Instructor's Signature _____ Date _____

Department Chair Name (*please print*) _____

Department Chair's Signature _____ Date _____

For a description of independent undergraduate research or creative investigation course credit see reverse side of this form. Registration on drop/add form must accompany this form.

