

## Independent Study Petition

Academic Programs Office

## Decorative Arts, Design History, Material Culture

**NOTE:** Please attach a description of your proposed project. Explain how it relates to your previous coursework and your academic interests. Include a detailed working bibliography.

## TO BE COMPLETED BY STUDENT Semester for which you wish to receive credit ☐ Fall Term ☐ Spring Term Year: \_\_\_\_\_ Student Name Banner ID Number Date Independent Study Title Independent Study Credits Received To Date Student Signature Date TO BE COMPLETED BY FACULTY SPONSOR Please comment on the proposed project's feasibility and validity: Explain on what basis the project will be evaluated: Faculty Sponsor Name Signature Date FOR USE BY THE GRADUATE COMMITTEE ONLY Request was (check one): ☐ Approved ☐ Denied Academic Programs Signature Date