

REQUEST FOR INDEPENDENT STUDY OR RESTRICTED ENTRY

~ OFFICE OF THE REGISTRAR - 101 MONTANA HALL - MONTANA STATE UNIVERSITY ~

STUDENT ID#: _____ **NAME:** _____
(LAST, FIRST MIDDLE)

STUDENT SIGNATURE: _____

TERM: FALL SPRING SUMMER **YEAR:** _____

CRN: _____ **SUBJECT:** _____ **NUMBER:** _____ **SECTION:** _____ **CREDITS:** _____

TITLE: _____

INSTRUCTOR'S PRINTED NAME: _____

INSTRUCTOR'S SIGNATURE: _____ **DATE:** _____

DEPT. HEAD'S SIGNATURE: _____ **DATE:** _____

REQUESTS FOR INDEPENDENT STUDY MUST BE ACCOMPANIED BY A WRITTEN PROPOSAL DESCRIBING THE EXACT ACTIVITIES TO BE ENGAGED IN FOR THE CREDITS. THE PROPOSAL MUST BE PRESENTED TO THE INSTRUCTOR FOR REVIEW. IF APPROVED BY THE INSTRUCTOR, A STATEMENT MUST BE ATTACHED BY THE INSTRUCTOR INDICATING THE PROCESS TO BE USED FOR EVALUATION OF THE STUDENT'S ACHIEVEMENT AND ASSIGNMENT OF GRADE. SUCH DOCUMENTATION WILL BE RETAINED IN THE DEPARTMENTAL OFFICE AND MUST BE AVAILABLE TO THE COLLEGE DEAN, OR VICE PRESIDENT OF ACADEMIC AFFAIRS UPON REQUEST.

RETURN COMPLETED FORM TO THE REGISTRAR'S OFFICE, 101 MONTANA HALL.