

Semester/ Year _____
Credit Hours * _____
Serial Number _____

COLLEGE OF ENGINEERING & APPLIED SCIENCES
WESTERN MICHIGAN UNIVERSITY

APPLICATION TO ELECT

GRADUATE INDEPENDENT STUDY COURSE IN:

Department _____ Course Number _____ Course Title _____

Name _____ WIN# _____

Local Address _____ Local Phone # _____

Email Address _____

DESCRIPTION OF PROJECT

(Write a specific statement concerning your reading, study, or project. Bound the problem such that it is possible to complete it within one semester. Provide a time schedule with respect to completion of specific segments of your undertaking. Include a statement which is mutually agreed to by you and the instructor concerning the method of evaluation.) Upon agreement of all signed parties, this statement constitutes the contracted basis for the work to be completed and evaluated.

Written report to be submitted: Yes No

*One credit should require nominally 45 hours of student work per semester.

Incomplete grades will be good for one calendar year after the term. Failure to remove the "I" during this period will require you to register for an equal number of credit hour.

A GRADE WILL BE ISSUED BY THE DEPARTMENT CHAIRPERSON UPON RECEIPT OF A FILE COPY OF A REPORT DOCUMENT AND THE INSTRUCTOR'S EVALUATION.

1. Student's signature _____ Date _____

2. I have conferred with the student and I will supervise his work.

Instructor's Signature _____ Date _____

3. TO BE COMPLETED BY STUDENT'S ACADEMIC ADVISOR:

Credit will be used as (a) a substitute for: _____ or

(b) An elective course in excess of required courses for graduation: _____

Counselor's Signature _____ Date _____

4. Chairperson's Signature _____ Date _____

TO BE USED AT REGISTRATION AS "WRITTEN CONSENT" TO ENROLL IN THE COURSE, THIS FORM MUST BE COMPLETED AND SIGNED BY ALL PARTIES.

DISTRIBUTION: (1) Depart. Chairperson (2) Counselor (3) Instructor (4) Dean (5) Students