

COM 436 – INDEPENDENT STUDY

DEPARTMENTAL REQUEST FORM

PLEASE FILL IN or TYPE
MAKE 3 COPIES

- Faculty Project Director
- COM Department
- Student

Date of Request:

This form must be completed and returned to the Communication Studies Department (203 PH), prior to enrollment in COM 436 (*this means before the beginning of the term in which the proposed project is to be undertaken*). A copy of this form must be presented in order to be permitted to register.

Name:

CWID #:

E-mail:

Phone:

Current Standing:

Junior
Senior

Hours completed toward degree (at end of semester) _____
Approximate GPA _____

Title of Project:

Number of Credit Hours (1-3) _____

Summary of Proposed Project: (single space – if more space is needed, attach sheet)

I request that

serve as the faculty project director.

Approved:

Date:

Faculty Project Director

Approved:

Date:

Student Academic Advisor

Approved:

Date:

Department Chair