Independent Study Application

Department of Music, Theatre, and Dance-Oakland University

(Submit to Curriculum Committee or Graduate Committee by second week of semester in which work is to be done). To be completed by student: ☐ Undergraduate ☐ Graduate Grizzly #: _____ E-Mail (Required) Mailing Address: City: _____ Zip: _____ Phone Number: _____ Course CRN: ____ Credits: ___ Semester: ____ To be completed jointly by student and faculty sponsor: Please describe the project in some detail, Including such things as subject, purpose, methodology, frequency of meetings with instructor, means of evaluation. Attach reading lists if appropriate. If the material is covered by a course regularly offered at OU, please explain why it is to be via independent study. Attach extra sheet if necessary. Signatures: Sponsor (must be Instructor (if other Date Student Date Date full-time faculty) than Sponsor) □ Returned to student for modification of clarification ☐ Disapproved Committee action:

Approved Comment: Photocopy & Distribute Student (copy) Advisor (copy) Student File (original)

Committee Signature

Date