

GRADUATE REQUEST FOR INDEPENDENT STUDY COURSE

Please complete this form with your Professor and return it to the Spanish and Portuguese Program Office in Herter 416. If you are requesting independent study, please attach a syllabus or work plan and a letter addressed to the Spanish and Portuguese Program Graduate Studies Committee explaining why you are requesting this particular independent study.

1) STUDENT NAME: _____

2) SPIRE ID NUMBER: _____

3) COURSE LEVEL PER PROFESSOR (*Please check one*):

600

700

4) PROFESSOR/INSTRUCTOR NAME: _____

5) SEMESTER AND YEAR: _____

6) I will be taking the class as a (*please check one*):

_____ Reading course with Paper

_____ Reading course without Paper

_____ Seminar level course with Formal Paper

_____ Undergrad level course with Formal Paper

7) NUMBER OF CREDITS: _____

8) TITLE OF COURSE: _____

9) STUDENT SIGNATURE: _____

10) PROFESSOR SIGNATURE: _____

DO NOT WRITE BELOW THIS LINE

Date Approved by GSC (if applicable): _____

Date Student Enrolled in Course Via Spire: _____

Date Instructor Added in Spire (as section asst. with post grade access/no print in sched.): _____

Signature of Program Dir/GPD (if required)

Revised 2/03/17