

FACULTY OF HUMANITIES AND SOCIAL SCIENCES
FORM TO REQUEST AN INDEPENDENT STUDY



THE COOPER UNION

SEMESTER & YEAR _____

COURSE NO (OR) HTA99 HUM99 SS99 CREDITS _____

NAME OF STUDENT _____

DATE SCHOOL/ YEAR _____

PREREQUISITES SATISFIED
OR WAIVED? _____

TITLE OF COURSE/PROJECT _____

DESCRIPTION OF PROJECT

COMPLETED WORK DUE ON _____

INSTRUCTOR'S APPROVAL

SIGNATURE PRINT NAME DATE

DEAN'S APPROVAL

SIGNATURE PRINT NAME DATE