University of Rochester Department of Computer Science

Independent Study Approval Form

Last name, First name		Student ID	Date
Class Year	NetID/Email		
Check one:			
CSC391: Independ	lent Study	CSC395: Independent Research	
Check if doing additional Writing or Honors: W H			
How many credits?	0.5 1 2	3 4	
Topic of Study:			
Description of work to be done:			
Description of how work will be evaluated:			
*This form does NOT officially register you for an independent study Instructor Information:			
Name		Email address	
How many credits of independent study (including this) will you complete with this instructor?			
Note: University policy limits students to take 8 credits maximum of independent study per instructor (except for senior honors projects approved by department Chair)			
Instructor's Signat	ture:		

Once you receive the instructor's signature, email a copy of this form to your undergraduate coordinator. Then officially register by completing the *Independent Study Form* listed under the *Course Forms* tab on the University Registrar's website.