School of Interdisciplinary Informatics – Independent Study Agreement

Prerequisite: Permission of Program Chair/School Director

This form must be completed and signed before the end of the second week of class. Failure to do so may end up in an administrative withdrawal from the course, waiving any refund of tuition.

Student Information				
Name NU ID# Address	Credit Hours Semester			
Telephone				
Independent Study Information				
Justification for Independent Study:				
Academic Supervisor/Student Meeting T	Гime:			
Student Signature	 Date			
Academic Supervisor Signature	Date			
Program Chair/Director Signature	Date	Approved	Disapproved	
Attach the proposal to this cover sheet. minimum:	The proposal should o	ontain the following	g at a	

- A. Title of Study
- B. Detailed description of the study (maximum three typed pages).
- C. Reference materials to be used
- D. Grading Criteria
- E. Timeline
- F. Deliverables