

Center for Public Administration and Policy

PAPA 5974 Independent Study

STUDENT INFORMATION

Name: _____

Student's VT #: _____

Local Address: _____

Major: _____

COURSE INFORMATION

Term/Year: _____

Instructor: _____

Instructor's PID: _____

Date request submitted: _____

Credit hours: _____ (P/F only)

College: _____

Title of proposed study: _____

Give brief description of the study, objectives, materials and methods, justification and method of evaluation: _____

Student's signature: _____ Date: _____

APPROVALS:

Advisor: _____ Date: _____

Instructor: _____ Date: _____

Dept. Head: _____ Date: _____