



FLORIDA ATLANTIC UNIVERSITY

College of Education

Department of Curriculum and Instruction
College of Education
777 Glades Road
Boca Raton, FL 33431-0991
Tel. 561.297.6594

Proposal for Direct Independent Study

Department of Curriculum and Instruction

STUDENT:

Student Name: _____ Z#: _____

FAU Email: _____ Telephone: _____

Address: _____
(street, city, state & zip code)

_____	_____	_____	_____	_____	_____	_____
Crse. Prefix	Course #	Sec. #	CRN #	Semester	Year	Credit Hours

FACULTY:

Specific Title of Study for Transcript (up to 32 characters/spaces)

Description of Study:

Objectives:

Method of Evaluation:

Readings:

APPROVALS:

Student: _____	Date: _____
DIS Supervisor: _____	Date: _____
Department Chair: _____	Date: _____

Original form to be stored in student file located in Department Office
DO NOT SEND TO SCHEDULING DEPARTMENT