

## **Department of Curriculum** and Instruction

Education Building, ED495 777 Glades Road Boca Raton, FL 33431-0991 Tel. 561.297.6594

## **Proposal for Directed Independent Study**

Department of Curriculum and Instruction

STUDENT Student Name:				7	,111	
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Address: (stre	et. citv/state.	zip code)				
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Crse. Prefix	Course#	Sec. #	CRN#	Semester	Year	Credit Hours
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Specific Title o	Study for 1	ranscript (up	0 to 32 cha	racters/spaces	5) 	
Description of Study:						
Objectives:						
Method of Eva	luation:					
Readings:						
APPROVALS:						
Student:					Date:	
DIS Supervisor:					Date:	
Department Cha	ir:				Date:	