Independent Study Application
Department of Political Science

Name: _____

Student UT ID#: _____

Email Address: _____

Date: _____

Title of Project: _____

Semester and Year of Project: _____

Circle one: Undergraduate Student Graduate Student

Course Number: _____ Number of Credit Hours: _____

Short description of project (attach separate pages if necessary):

_____

_____

_____

_____

_____

Approved by:

_____

Faculty Sponsor: (Print Name) (Signature) (Date)

_____

Department Head: (Print Name) (Signature) (Date)