UNIVERSITY AT ALBANY
Department of information studies
College of computing and information

INDEPENDENT STUDY PROPOSAL
(IST 669)

Please submit this form to the IST Office (Draper 116) at least one week before you plan to register. You should already have discussed your proposal with the faculty member who will supervise your study. The study should be at least equivalent in its demands and effort to a regular course of equal credit. It may not substitute for any course in the curriculum. Your proposal must be approved and signed by the faculty supervisor before submitting it to the IST office for the chair’s approval.

I request approval for the following independent study, to be taken in ___________________________

SEMESTER \n
YEAR

Number of credits to be earned: __________
Number of credits previously earned in independent study: __________
Title: ___________________________
Abstract of proposed study: ___________________________

__________________________________________
Student ID

Signature of Student

__________________________________________
Signature of Faculty Supervisor

__________________________________________
Signature of Chair