

Name _____
PLEASE PRINT

UNIVERSITY AT ALBANY
Department of Information Studies

INDEPENDENT STUDY PROPOSAL
(IST 669)

Please submit this form to the IST Office (Draper 113) 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 office for the dean's approval.



I request approval for the following independent study, to be taken in _____
YEAR SEMESTER

Number of credits to be earned: _____

Number of credits previously taken in independent study: _____

Title: _____

Abstract of proposed study: _____

_____ Student ID

_____ Signature of Student

_____ Signature of Faculty Member

_____ Signature of Dean

_____ Date