GRADUATE INDEPENDENT STUDY

I have agreed to supervise \_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In WRTG  6910  7910 (check one) for \_\_\_\_ credit hours

Spring  Fall \_\_\_\_\_\_\_\_

Year

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Supervisor's name (please print) Supervisor's signature Date

Comments:

Approval:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Director of Graduate Studies name Director of Graduate Studies signature Date

Description of Study:

Outcome:

**Reading List for Independent Study Course**

**Critical Readings:**