

Directed Independent Study Agreement Form (CGN 6905/ENV 5905)

Instructions: (1) Please fill out the form immediately after you enroll in the course. (2) Submit the form signed by you and your instructor within one week of enrollment to the Graduate Program Director.

Last Name: _____ First Name: _____ PID: _____

Email: _____ Cell Phone: _____

Degree Program: MSCE MSENV Ph.D.

Instructor: _____ Phone: _____ Email: _____

Year: _____ Semester: Fall Spring Summer

Subject Title: _____

Course Outlines and Objectives:

Grading Requirements: _____

(List all required grading components, e.g., final report, progress reports, papers, homework, presentations, software, etc.)

Course Materials: _____

(List all required textbooks, professor notes, reading materials, software packages, etc.)

Meeting Days and Time: _____ Location: _____

By signing below, you are agreeing to the requirements set forth by the Instructor.

	Print Name	Signature	Date
Student:	_____	_____	_____
Instructor:	_____	_____	_____
Graduate Program Director:	_____	_____	_____
Chair:	_____	_____	_____