

Department of Philosophy and Religion Studies



Graduate Independent Study / Special Problems Form

This form is to be completed and signed by all parties prior to the first class meeting. Please allow time for the Registrar's Office to input the course into the system so it reflects accurately on transcripts and degree plans. Additionally, a syllabus for the course must be attached to this form and turned into the Dept. Office in EESAT 225.

Semester: _____ **Student Name:** _____

Year: _____ **Student ID Number:** _____

Instructor: _____ **Major Professor:** _____

Course Title: _____

Course Number: PHIL _____ **Number of Credit Hours:** _____

Course Description:

Statement of Justification:

Approved By:

Course Instructor

Student's Major Professor

Director of Graduate Studies

Department Chair