

# WATSON SCHOOL INDEPENDENT STUDY COURSE REGISTRATION FORM

## For Projects, Thesis, Dissertations, Practica, Internships, Co-ops

*This form must be used to register for any Watson School Independent Study course. Independent Study courses are identified in the Schedule of Classes and generally bear course numbers in the 90's; e.g., 395, 497, 599, etc. It is the student's responsibility to secure all information and signatures required. **IF ANY PORTION OF THIS FORM IS LEFT UNFILLED IT WILL BE RETURNED TO YOU AND YOU WILL NOT BE REGISTERED IN THE SYSTEM FOR THIS COURSE.** You are liable for tuition charges and you must add, change, or drop this course within the legal dates as stated in the Schedule of Classes. If you are taking two or more of the same course (e.g., two CS 97s), please note this in the appropriate space on this form.*

**NOTE:**

- ✓ Students in the ECE Department must see their department secretary for an additional form for EECE 497 and EECE 597
- ✓ Students in the ME Department must see their faculty adviser for additional paperwork.
- ✓ ENINET Students must process this form through the ENINET OFFICE in EB-J21 (1-800-478-0718)
- ✓ All other students return this completed form to your Department Secretary.
- ✓ A DARS exception form will be required if using this experience as a professional or technical elective.
- ✓ Harpur, CCPA, SOM, and SON independent study course registrations must be processed through the appropriate departmental office in those schools.

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|--------------------------|------------------|---------------------|-------------|
| <b>STUDENT B-NUMBER:</b> | Last Name: _____ | First Name _____    | Date: _____ |
| Address (local): _____   |                  | Phone: _____        |             |
| Major: _____             | Email: _____     | Date of Birth _____ |             |

Action to be taken: • Add • Change • Drop

COURSE NAME & NUMBER: \_\_\_\_\_ Credit Hours: \_\_\_\_\_  
 (e.g., CS 497, EECE 599, ME 698, etc.)

• Check here if this is a second Ind. Study with same instructor and course number, in the same semester

CRN: \_\_\_\_\_  
 Grade Option: • Normal • P/F or S/U  
 Semester: • Fall • Spring • Summer  
 Year: 20\_\_\_\_

• W - Writing credit (Undergraduate only)

**TITLE OF INDEPENDENT STUDY or Applicable Internship** (optional) :  
 Limit of 30 characters: please be descriptive and abbreviate as necessary. The title you assign will appear on your OFFICIAL University transcript.

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**INSTRUCTOR APPROVAL**

INSTRUCTOR: (please print) \_\_\_\_\_ INSTRUCTOR SECTION CODE NUMBER: \_\_\_\_\_

INSTRUCTOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Department Approval (if required): \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICE USE ONLY**

DATE POSTED \_\_\_\_\_

BY \_\_\_\_\_  
 (person posting course to student's schedule)