



## Department of Electrical Engineering Independent Study Request Form

Semester: Fall Spring Summer, 20\_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> EENG 4199 Undergraduate Ind. Study | <input type="checkbox"/> EENG 5199 Graduate Ind. Study |
| <input type="checkbox"/> EENG 4299 Undergraduate Ind. Study | <input type="checkbox"/> EENG 5299 Graduate Ind. Study |
| <input type="checkbox"/> EENG 4399 Undergraduate Ind. Study | <input type="checkbox"/> EENG 5399 Graduate Ind. Study |

Name of Student \_\_\_\_\_ Student ID # 5000-\_\_\_\_\_

h Email Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Supervising Faculty \_\_\_\_\_

Description of Topics Covered and Grading Plan:

Additional material can be attached if needed.

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Advisor Signature Date

\_\_\_\_\_  
Faculty Signature Date

\_\_\_\_\_  
Department Chair Signature Date

### FOR OFFICE USE ONLY

\_\_\_\_\_  
Course Section Enrolled

\_\_\_\_\_  
Permission Number

\_\_\_\_\_  
Class Number