COLLEGE OF ARCHITECTURE + LANDSCAPE ARCHITECTURE

Independent Study Proposal form

CALA Room A303D | 1040 N. Olive Rd (520) 621-9819

Please complete this form and obtain signatures of approval BEFORE registering. Once complete bring it to the College of Architecture and Landscape Architecture Graduate Programs Coordinator. This form is for academic records and is used to assign a grade at the end of the semester. Signatures (Required)

Students should have a specific proposal or project in mind and have consulted with their committee Chair before requesting registration.

REMINDER: The last day to register for courses without the \$250 census date late charge in the Fall/Spring semesters is the 21st day after the first day of classes. For Winter/Summer sessions (to avoid a \$50 late charge) register by the day before the last day to drop with deletion from the record.

THIS FORM MUST BE TYPED OR PRINTED NEATLY. Illegible forms will not be accepted.

Name:					SID:	
Semester:	□ Fall	□ Spri	ng 🗆 Sumi	mer Year:	Defense Date:	
Program:		□ ARC □	LAR 🗆 PLG	Project Ad	lvisor/Section No	
Course Number:		□ 593 / 6g	93 Internsh	ip N	Number of Units:	
		□ 599 Ir	ndependent Stu	dy		
		□ 699 Ir	ndependent Stu	dy		
		□ 799 Ir	ndependent Stu	dy		
Department		Pr	oject Advisor			
Title of Project						
Estimated hours pe	r week Stu	lent will spend	l on project			
Estimated Project A	dvisor/Stu	dent contact h	ours per week			
Please attach c	ı descrip	tion of the	project, includ	ing anticipated pro	oduct.	
Student:					Date:	
Project Advisor	:				Date:	

Date:

Degree Advisor: _