

## Independent Study Registration Authorization Form

### Student Information

Name: \_\_\_\_\_

UFID: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Select One:

EEL 5905\*- Independent Study- \_\_\_\_\_ Credit Hours

EEL 6905\*- Independent Study- \_\_\_\_\_ Credit Hours

Semester- \_\_\_\_\_

**Students must also submit a one page proposal approved by their supervising faculty member before this registration request can be processed. The proposal must list the topics and learning outcomes for the student. It must also include how the student will demonstrate their mastery of the subject. For more information, please see the Departmental Guidelines for Individual Study Courses (EEL 4905, EEL 5905, EEL 6905) available on the ECE Current Graduate Student website.**

### Faculty Authorization

Faculty Name (Print): \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return completed authorization form along with a one page proposal to the Student Services Office (Larsen 230) to finalize registration.**