

Student Name		Date
Student ID	BroncoMail Email	
Graduate Program Catalog year		Anticipated Graduation Date

Instructions

Purpose: A Graduate Independent Study involves advanced study of a specialized topic. Any student who has been admitted to the Graduate College is eligible. The graduate student is expected to work under the supervision of a member of the graduate faculty but with a high degree of autonomy.

Note: Independent studies cannot substitute for regularly scheduled course offerings. Nor may a scheduled course offering be a significant component of an independent study.

Procedure: The student is responsible for completing and signing the Application for Graduate Independent Study (GIS) form. Once signed by the Supervising Professor, Advisor, Department Chair, and Program Coordinator the GIS form is to be submitted to the Office of the Registrar for final processing by the posted deadline on the Academic Calendar found here.

Independent Study Course Information

Course and grading information

Semester	Year	Course Prefix	Course #	Credits Requested	Gr	ade
			596		Letter grade	D Pass/Fail

Title of Proposed Independent Study (required)

Description of Topic to be Studied by Student (attach a separate sheet, if necessary)

Assessment Method to be Employed by Supervising Professor

Signatures

Student Signature		Print Name		Date	
Approved	Disapproved	Univer	sity Use Only		
		Supervising Professor Signature	Print Name	Date	
			Print Name		
		Advisor Signature		Date	
		Program Coordinator Signature	Print Name	Date	
		Department Chair Signature	Print Name	Date	

Deliver to: Boise State Registrar's Office, Administration Building, Room 110, 1910 University Drive, Boise, ID 83725-1365 Email: regmail@boisestate.edu | Phone: (208) 426-4249 | FAX: (208) 426-3169