

STUDENT-FACULTY AGREEMENT

URBDP 600 INDEPENDENT STUDY/RESEARCH

Individual readings or study—including independent study in preparation for doctoral examinations—research, etcetera. *Permission of Department Chair is required.* Name and signature of faculty member responsible for supervision of the student must be included below.

The URBDP 600 Independent Study/Research form is for graduate students—undergraduate students should instead use the URBDP 499 Special Projects Form.

Instructions:

Students must fill out the top portion of the form, working with their Independent Study faculty supervisor to develop and plan the program of study/research; and to determine the product of the study/research, the number of credits, the quarters in which the work will be undertaken, and whether it will be taken for credit/no credit or graded.

Once the program of study/research is finalized, the student and the Independent Study faculty supervisor must both sign the form. The signed form should then be turned in to Diana Siembor in 410 Gould Hall for review and signature by the Department Chair.

Add codes for URBDP 600 Independent Study will only be given out if a completed and fully signed Agreement form is on file.

BE PhD and UDP PhD Students: Please have your GPC sign the form prior to turning it in for an add code.

STUDENT NAME _____

DATE WORK TO BEGIN _____ **DATE WORK TO BE CONCLUDED** _____

PROPOSED PROGRAM OF STUDY OR RESEARCH (attach additional pages if necessary):

PRODUCT OF STUDY/RESEARCH:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Paper of publishable quality | <input type="checkbox"/> Bibliography |
| <input type="checkbox"/> Research paper | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Presentation | |

TOTAL CREDITS OF URBDP 600 EARNED TO DATE _____ (12 Maximum Allowed for MUP Students)

PROPOSED NUMBER OF CREDITS _____ **FOR** _____ **QUARTER, 20** _____

- CR/NC** or
 GRADED (grade will show on transcript but is not included in GPA calculation)

I agree to conduct this Independent Study project in accordance with arrangements outlined above and under the supervision of the faculty member indicated.

Signature of Student _____ Date _____

FACULTY SUPERVISOR _____

I agree to supervise this Independent Study project and have made preliminary arrangements with the student for its being carried out in the terms of the program statement and time frame above.

Signature of Faculty Supervisor _____ Date _____

- APPROVED**
 NOT APPROVED

Department Chair or GPC _____ Date _____