INDEPENDENT STUDY

Please attach a detailed course description of this independent study. Your description should include a reading list, assignments, possible meeting times, syllabus (where appropriate), etc. This form must be signed by the student, the supervisor of the independent study, and by the Philosophy DGS (electronic signatures are acceptable). Once completed, please pass the form onto the Graduate Coordinator. Please note that this form should be completed before the start of the relevant quarter in which the independent study is undertaken.

Year & Quarter: ..................

Student (print name): ..................

Signed: .................. Date: ..............

Supervisor (print name): ..................

Signed: .................. Date: ..............

Philosophy Director of Graduate Studies (print name): ..............

Signed: .................. Date: ..............