

FAYETTEVILLE STATE UNIVERSITY  
THE GRADUATE SCHOOL

Independent Study Request

An existing course listed in the Graduate Catalog may not be taught as an independent study. Anyone seeking to pursue independent study must be a candidate seeking a degree at Fayetteville State University.

Academic Year: 20\_\_ - 20\_\_

For Semester (check one): Spring: \_\_\_ Fall: \_\_\_ Year: \_\_\_ Summer I: \_\_\_ Summer II: \_\_\_

Instructor: \_\_\_\_\_ Coordinator: \_\_\_\_\_

Student Name: \_\_\_\_\_ Banner ID: \_\_\_\_\_

Course Subject & Number: \_\_\_\_\_

Course Title: \_\_\_\_\_

Total Contact Hours Required: \_\_\_\_\_

Attach Syllabus for the course that adheres to Fayetteville State University's syllabus format  
<http://www.uncfsu.edu/acadaff/pubsandforms.htm>

Justification for Request:

**NOTE: This form is to be completed by the instructor and forwarded to the Department, Dean of the School/College, and Dean of The Graduate School for approval or disapproval.**

Approved \_\_\_ Disapproved \_\_\_ Approved \_\_\_ Disapproved \_\_\_

\_\_\_\_\_  
Department Chair Date

\_\_\_\_\_  
Dean of the School/College Date

Approved \_\_\_ Disapproved \_\_\_

\_\_\_\_\_  
Dean/Assistant Dean of The Graduate School Date

Upon approval original will be sent to Registrar's Office for processing.

- CC: Graduate Student
- Department Chair
- Dean of the School/College
- Dean of The Graduate School