

Loyola University New Orleans

Independent Study Request Form

Year	Term	Subject	Course #	Sec #	Instructor's Name

Course Title

Student's College	Credit Hours	Grade Type
		Letter or Pass/Fail

Student's Name

Campus Wide ID

Student's Signature

Instructor's Signature

Department Chair's Signature

Honors Program Director (if appropriate)

Associate/Assistant Dean's Signature

Please attach complete syllabus

STUDENT: Obtain all signatures and submit this form to your Associate or Assistant Dean.

Undergraduate Course Numbers

495-Special Project

496-Seminar

497-Internship

498-Research Project

499-Independent Study

Graduate Course Numbers

895-Special Project

896-Seminar

897-Internship

898-Research Project

899-Independent Study