

**College of Engineering & Applied Science – Department of Mechanical Engineering
Independent Study Agreement and Petition to the Graduate Committee**

Name: _____ Student Number: _____

Semester: _____ Credit Hours (1-3): _____ Degree Seeking: BSMS MS PhD

Year in program: _____ Email Address: _____

Focus Area: _____ Independent study hours earned to date: _____

Independent Study Topic: _____ Overall GPA: _____

Faculty Advisor Name: _____

Briefly describe what you are petitioning for and why:

Please attach to this form your independent study proposal, which could be in the form of an independent study timeline or syllabus.

Your Signature: _____ Date: _____

Independent Study Instructor Signature: _____ Date: _____

Independent Study Instructor Name: _____

Registered by _____ Date: _____

Graduate Advising Coordinator

GRADUATE COMMITTEE DECISION

Approved _____ Declined _____ Date _____ Initials _____