Application for Special Study 495, 595

Note: Special Studies may not duplicate a course which is listed in the Catalog and which is normally offered within a two-year period.

Semester: __________________
Grade Mode: CR/NC Grade

<table>
<thead>
<tr>
<th>Subject</th>
<th>Units (1-4)</th>
<th>Title of Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>495</td>
<td></td>
<td></td>
</tr>
<tr>
<td>595</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name: ____________________________________________ 
(Last) (First) 
Student ID #: ____________________________
Telephone Number: ____________________________ 
Email: ______________________________________
Major: _________________________________________ 
Minor: _________________________________________

Units Earned: ________ Cum. GPA: ____________________ 
Is this an Extended Education Course: Yes No

Description of proposed project (i.e., content, goals, reading list, and schedule of activities):
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________

Proposed schedule of student/faculty conferences:
_______________________________________________________________________________________________________

Basis upon which grade will be assigned:
_______________________________________________________________________________________________________

APPROVAL:

1. Instructor: ________________________________________________________________________ Date: _____________

2. Advisor: __________________________________________________________________________ Date: _____________

3. Department Chair: __________________________________________________________________ Date: _____________

4. School Dean: ______________________________________________________________________ Date: _____________

PROCEDURES:

1. Complete this form, securing all signatures required in the order listed on this form.
2. File form with the Scheduling Office, STEV 1024, during the add/drop period. Please check with your School Dean’s Office for school deadlines which may be earlier.