

INDEPENDENT STUDY REQUEST FORM

For directed reading, directed study or independent study course requests

STUDENT INFORMATION

Student ID: _____ **First Name:** _____ **Surname:** _____
Email: _____@unbc.ca **Campus:** _____
Status: Full-time Part-time **Current Residence:** Prince George Other:
Admit Date: _____ **Program:** _____
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COURSE INFORMATION

Semester	Subject and # (i.e. NRES 799)	Course Title (30 character limit)	Credit Hours	Instructor Name	Instructor Signature
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STUDENT SIGNATURE

By signing below, you affirm that you have reviewed and understand your degree requirements and, where required, have obtained necessary approvals to complete the requested course(s).

Information is collected in compliance with the BC Freedom of Information and Protection of Privacy Act and the policies and procedures of UNBC. For more detailed information, visit our website.

Course outline is attached Registration form is attached

Student Signature: _____ **Date:** _____

APPROVALS

Supervisor Name: _____ **Signature:** _____ **Date:** _____

Co-Supervisor Name (if any): _____ **Signature:** _____ **Date:** _____

Program Chair: _____ **Signature:** _____ **Date:** _____

➔ This form (including the course outline) must be submitted at the same time as the Graduate Registration Form to the Office of the Registrar (by email registration@unbc.ca). Incomplete forms cannot be processed.