

**Office of the Registrar
January Term
INDEPENDENT STUDY PERMISSION FORM**

This form should be submitted to: Registration Office, 11 Garrison Avenue, Durham, NH 03824-3511 (603) 862 -2015

Today's Date:

UNH Email

STUDENT I.D. NUMBER

STUDENT NAME

LAST FIRST MI

LOCAL ADDRESS:

Street City State Zip

I wish to register for:

Course Dept*	Course Number	SEC	Course Title	Credits**
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I hereby agree to sponsor the above named student for this independent study.

Instructor's Signature Date:

Instructor's Printed Name

Approval of Instructor's Associate DEAN required.

Associate Dean's Signature Date:

LOCATIONS FOR ASSOCIATE DEANS:

COLA MURKLAND 110
COLSA RUDMAN G05
CEPS KINGSBURY W283
PAUL PAUL COLLEGE 101
CHHS HEWITT 217
CONTINUING ED HOOD 111

***Attention** - this course must agree with the course stipulations for Independent Study in the Undergraduate or Graduate Catalog.
****Please Note** - Faculty compensation for supervising independent studies is limited to a maximum of 16 credits.

CRN (assigned by the Registrar's Office):

When fully approved and submitted to
Registration Office.

**Office of the Registrar
Stoke Hall 11 Garrison Avenue Durham, NH 03824-3511 603-862-1500 603-862-1817 Fax
Registrars.Office@unh.edu**