

**Office of the Registrar**  
**Summer Session**  
**SUMMER ONLY INDEPENDENT STUDY FORM**

Not required for Fall and Spring semesters

This form should accompany the student to the Registration Office and be submitted with registration form and course payment to:  
Registration Office, 11 Garrison Avenue, Durham, NH 03824-3511 (603) 862-2015 **Due by July 1.**

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

I hereby give the above named student permission to register.

Adviser's Signature  Date:

Approval of instructor's Associate Dean

Associate Dean's Signature  Date:

**Location of Study**

**LOCATIONS FOR ASSOCIATE DEANS: COLA MURKLAND 110 COLSA RUDMAN G05  
CEPS KINGSBURY W283 PAUL PAUL COLLEGE 101 CHHS HEWITT 217 CONTINUING ED HOOD 111**

Location  City  State

**\*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.