

Records and Registration
304 O'Brian Hall
law-records@buffalo.edu

Independent Study

Student Name _____ Date _____

Person Number _____ Expected Grad Date _____

UB Email address _____

I request permission to take an Independent Study for ___ credits during:

Semester & Year _____

Have you previously registered for an Independent Study? Yes _____ No _____

Are you expecting to receive seminar credit for this Independent Study? Yes _____ No _____

I currently have incomplete work pending in the following courses from previous semesters:

None _____

Course _____ Semester _____ Instructor _____

Course _____ Semester _____ Instructor _____

Attach your research proposal approved by the supervising faculty member. The proposal must describe the subject and objectives of the research, along with methodology and expected conclusions.

Faculty Member Name _____

Faculty Member Signature _____ Date _____

For Registrar's office use only: Registration Number _____ Section _____