BLUFFTON UNIVERSITY Bluffton, Ohio

INDEPENDENT STUDY APPLICATION

This form, with the proper signatures, must be filed with the Registrar's Office at the time of registration. A description of the study as approved by the department is to be attached for filing in the student's permanent folder.

Student Name	S	Student ID Number	
Marbeck Box (or home addr	ress if no box)		
Title of Independent Study			
390			
Department	Term when being done	Academic Year	
The above-named study ha	s been approved for	hour(s) of credit	
,	(number	r)	
by the	department.		
Department Chairperson	Supervis	Supervising Faculty Member	

Study description must include:

- Title of project or designation of area of study
- Description of work to be undertaken
- Indication of objectives
- Initial bibliography

Evaluation: Responsibility of supervising faculty member

All work to be handed in for evaluation at the end of the study is due one week before the end of the term in which it is completed. Letter grades are due at the time grades are due for other courses.