

UNIVERSITY HONORS PROGRAM Southern Illinois University Carbondale

APPLICATION FOR INDEPENDENT			
	(Section assigned by Honors Program)		
		Date	:
Name:		ID #:	
SIUC Address:		Phone:	
Major:	Ap	plication is for	semester credit hours
Semester in which you plan	_		20
Fall	Spring	Summer	20
Working title of independen	t atudy:		
working title of independen	i study.		
Summary of project proposa	l: *		
Signature of Student	Signature of Facu	lty Sponsor	Signature of Director
			University Honors Program
Date	Faculty Sponsor	-'s ID#	Date
	Date		

* Student must submit a final copy of the project to the University Honors Program in order to receive a grade and credit toward the Honors graduation option.

Revised 03/06/2009