## Department of Cinematic Arts AUTHORIZATION FOR GRADUATE INDEPENDENT STUDY

Three signed copies of this form - for the student's advisor, for the faculty member supervising the Independent Study, and for the student's permanent record - must be completed. \*\*Important Note: Make sure you enroll in the course on MyUI in order to earn credit for the course

Name		UID	Term
Description of Study	у		
Purpose of Study			
Why are you taking	an Independent Stu	udy rather than a scheduled course?	
		oposed Independent Study	
Zist provious course	work reference to pr		
Number of Credits		Target Completion Date	
Grading System (S/	U or Letter Grade)		
Approved:		Student's Signature	Date
Approved.			
Instructor	Date	Advisor	Date
Head of Program	Date	DEO	Date