

## Outline of Plan for Independent Study

Date \_\_\_\_\_

Student's Name \_\_\_\_\_

Major Department \_\_\_\_\_

Course No. \_\_\_\_\_ Title \_\_\_\_\_

Subtitle \_\_\_\_\_

Instructor \_\_\_\_\_

Statement of Purpose (use back if more space is needed):

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Methods and Procedures (use back if more space is needed):

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Approved By:

Instructor \_\_\_\_\_

Advisor \_\_\_\_\_