

TECH 69000 INDEPENDENT STUDY AUTHORIZATION FORM
Doctor of Technology (DTech)
Purdue Online - Polytechnic Institute

(NOTE: A maximum of 9 credit hours of independent study is permitted on this plan of study)
(Please type or print all information clearly)

Student Name _____ Student ID# _____

Number of independent study credits already completed: _____

I hereby request permission to enroll in TECH 69000 for _____ credits of independent study during the

Fall Spring Summer semester of 20____-20____. (Note: Instructors of TECH 690 must hold PHD or equiv.)

(circle one)

I plan to pursue an independent study project of the problem _____

(Please insert title of course)

I will submit all deliverables by: _____

Student's Signature

Printed Name

Date

I am willing to guide the independent study outlined in the attached prospectus and I agree to the deadlines indicated above.

Professor in Charge of Instruction Signature

Printed Name

Date

Enrollment in the above independent study is consistent with the degree objectives of this student and is
 on not on his/her plan of study. This student will not exceed six (6) credit hours of independent study on his/her plan of study with this enrollment.

Graduate Committee Chair Signature

Printed Name

Date

Approved **Not Approved**

Director, Center for Professional Studies Signature

Date

Associate Dean approval required only when approval is granted by the Departmental Graduate Committee

Approved **Not Approved**

Associate Dean for Graduate Programs Signature

Date