



Cornell University
School of Continuing Education
and Summer Sessions

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APPLICATION FOR INDEPENDENT STUDY

A student may arrange to register for any class listed in the University's *Courses of Study* catalog if a faculty member is willing to supervise the study and give a grade upon completion of the course.

To apply for individualized study, please complete this form, have your instructor and course-offering department sign it, and submit it with your enrollment form to the address above at least two weeks prior to the beginning of your proposed study. The applicable tuition is due at the time of registration. We recommend that you make a copy of this form for your records. For more information, please contact the School of Continuing Education and Summer Sessions.

For students:

Name: _____
(please print)

Phone number: _____ E-mail address/NetID: _____

Department offering course (e.g., CHEM, ENGL): _____

Class title: _____

Class number (e.g., 4990): _____ Credits: _____ Grade option: _____

Dates of class: _____ to _____
month/day/year month/day/year

Brief description of class (if different from *Courses of Study*):

For Cornell faculty members:

Name: _____ Phone number: _____ NetID: _____
(please print)

Campus address: _____

Under the terms of university policy, I understand that I will not be compensated for this service.

Faculty member's signature: _____

For department approval:

Name: _____ Phone number: _____ NetID: _____
(please print)

PLEASE NOTE: IF CLASS WORK IS NOT COMPLETED BY THE ENDING DATE, AN INCOMPLETE OR GRADE OF "F" MAY BE ASSIGNED.