History Department Directed Independent Study Course

Name of Student																				
ID	#										Telephone									
Address																				
Ha	Has my permission to register for:																			
HIS 4906, Sequence #Directed Independen															lent :	Stud	y			
	HIS 5909, Sequence #Directed Independent Study																			
HIS 6908, Sequence #Directed Independent Study																				
During the (circle one):																				
FALL SPRING SUMMER 20																				
For (circle number of hours):																				
1 Hour 2 Hours						3 Hours														
	Signature of Instructor																			
Ple	Please fill in the topic title using no more than 21 letters and spaces:																			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21