Application for Individualized Study
The Polytechnic School
590 Reading & Conference, 592 Research, 593 Applied Project

Please Type or Print Clearly:

________________________________________________________________________

________________________________________________________________________

Student Name__________________________________________________________Student ID #________

I am a student in the __________________graduate program and have completed ______semester hours
with a cumulative index of ____GPA. I have previously completed ______semester hours of
individualized study course work. I am enrolling for a total of ______semester hours individualized
study coursework this academic term.

Semester and Year course is to be taken:  ☐ Spring  ☐ Summer  ☐ Fall  ☐ 2015  ☐ 2016
☐ Session A  ☐ Session B  ☐ Session C

Course Prefix and Number: ____________________________

Course Title for Individualized Study: ____________________________

Purpose of individualized study: *(Present brief, but concise statement)*

Scope of Study: *(Present a content outline for the proposed study, use additional paper if necessary)*

Materials to be submitted: *(Indicate the final materials that will be submitted for grading, i.e. Mid-Term Report,
Summary Report, Applied Project)*

Date of Submission for final materials:__________________________

All signatures required for permission to be granted for registration purposes.
Submit to Graduate Advising Office (Wanner 201 or polygrad@asu.edu) for processing.

________________________________________________________________________

Student Signature__________________________________________Date

________________________________________________________________________

Instructor’s signature with whom you will work__________________________________________Date

________________________________________________________________________

Program Chair__________________________________________Date

________________________________________________________________________