



**DEPAUL UNIVERSITY
DRIEHAUS COLLEGE OF BUSINESS**

APPLICATION FOR INDEPENDENT STUDY

INSTRUCTIONS: Please print all information requested clearly and submit to faculty sponsor. Completion of this form does not constitute registration. All Independent Study courses **MUST** have the approval of both the instructor and department chair. The completed application is forwarded to the Commerce Undergraduate Program Office (5200 DPC) for processing.

To be completed by the student:

Name: _____ DePaul ID #: _____

Email Address _____ Telephone: _____

Address: _____

City: _____ State: _____ Postal Code: _____

To be completed by the instructor and the department chair:

This student has my permission to take as an Independent Study (check one):

Accountancy _____ Economics _____ Finance _____ Business Law/Management _____ Marketing _____

Dept _____ Course # 399 Equivalent Course # _____

Course Title _____

Hours of Credit _____ Quarter (check one) Fall _____ Winter _____ Spring _____ SSI _____ SSII _____

Instructor Signature Print Name DPU ID#

The Independent Study course listed above has been approved by the Department Chair:

Chair Signature Date

For office use only:

Dept _____ Course # _____ Section # _____ Class # _____ Term _____

Data Entry Date _____ Transaction completed by _____

Copy to: Department _____ Student File _____