

Enrollment in an Independent Study Course 6995-Graduate School of Management

Purpose: Used ONLY by Graduate School of Management students to request enrollment in a course whose mode of instruction offers the student an opportunity to study or research a topic or subject matter in-depth with a current Marquette faculty of his/her choice that is usually not offered in the established curriculum and independent of the classroom setting.

Student Instructions

- 1. Register via CheckMarq for all other courses you may also be taking. Do <u>not</u> wait until the Independent Study course is processed.
- 2. Complete Sections 1-4 of this two page form using a computer.
 - a. a handwritten form will not be accepted.
 - b. an incomplete form will not be processed and will be returned to you for completion.
- 3. Print the form using the 'Print Form' button below.
- 4. Sign the request in Section 5; a digital signature is not acceptable.
- 5. Obtain the signatures of the instructor and the Chairperson or Director of Graduate Studies of the department offering the course in Section 6.
- 6. Forward the form to the Graduate School of Management for processing.

Note: requests are not processed until after the start of the registration period for a semester.

Graduate School of Management Instructions

1. Approve request with signature in Section 7.

Section 1: Student Information

- 2. If needed, provide copies of this form to the student, the instructor and the Chairperson or Director of Graduate Studies of the department offering the course.
- 3. After approval, send the request to the home college of the independent study course. The home college will register the student for the course.

Name Last name,	First name, Middle name					
Address						
Phone –		Email ————————————————————————————————————				@marquette.edu
MUID		Program 			_	
business of	, GSM students must be in	undation courses. A maxi		de point average; and <u>not</u> oi ependent Study is permitted		d have completed at least 6 hours of gradua
	2: Independent Studendent Study Courses are		asis.			
Subject C	ode	Credit Hours	Year	Session	Term	
	(e.g. ENGL)			_	Fall, Spring,	or Summer
Specific T	itle. The course will not be	recorded on the student's	record unless a specifi	c title is provided. <i>Use a ma</i>	aximum of 60 characters .	



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Section 3: Student Information
Name Last name, First name, Middle name
MUID
Section 4: Independent Study Course Proposed Outline
Instructor's Name Instructor's MUID Instructor's MUID
Proposed Course Outline (include required outcomes, timetables and grading criteria). Attach additional pages if necessary.
Section 5: Student Statement/Signature I am aware of the number of hours per week that this Independent Study requires, and I will work that number of hours. If I become unable to work that number of hours, I will notify my department to have my credits can be changed appropriately.
Signature of Student
Section 6: Instructor and Dept. Chair or Director of Grad. Studies Signatures Signatures below verify that this Independent Study will be conducted in accordance with the contact hour requirements of the University Scheduling policy and will be utilized as defined in the purpose above. Signature of Instructor
Signature of Dept. Chair or Director of Grad. Studies
Section 7: Graduate School of Management Approval Signature below verifies that this Independent Study will be conducted in accordance with the contact hour requirements of the University Scheduling policy and will be utilized as defined in the purpose above.

Signature of GSM Office