Department of Criminal Justice
Indiana University

UNDERGRADUATE INDEPENDENT STUDY/RESEARCH PROPOSAL

Name ________________________________ ID#__________________________

Student signature __________________________ Date ______________________

Phone numbers __________________________ __________________________
(Campus) (Home)

Course: P495_______ P496_______ P399_______ P499_______ (honors course)

Academic Year ________________ Semester ________________ Credits ______

Sponsoring Professor’s name ________________________________

Sponsoring Professor’s signature ________________________________

Proposal: Provide a statement that clearly details what you will be doing to earn credit for this course. Clearly state the course’s objectives, how they will be assessed, and how your grade will be determined.

This form must be presented at the time of request for authorization. Prior approval of the professor is required.

Department Chair’s Signature __________________________ Date ________