

**Department of Sociology**

**SOC 5951, SOC 5952, SOC 5953: Independent Study Application**

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID Number

Quarter:

Number of Units:

\_\_\_\_\_ Fall

\_\_\_\_\_ 1

\_\_\_\_\_ Spring

\_\_\_\_\_ 2

\_\_\_\_\_ Summer

\_\_\_\_\_ 3

Please give a brief description of your proposed project:

Submit this form to the instructor supervising your project for approval and signature. Return the signed form to the Department of Sociology (SB-327) and enroll through MyCoyote.

\_\_\_\_\_  
Faculty Supervisor

\_\_\_\_\_  
Date