

VALPARAISO UNIVERSITY – THE GRADUATE SCHOOL
DROP/ADD CARD – CHANGE IN REGISTRATION

STUDENT ID: _____ **DATE:** _____

NAME: _____

COURSES DROPPED

COURSES ADDED

| DEPT | CRSE NO | SEC | CR HRS. | DEPT | CRSE NO | SEC | CR HRS. |
|------------------------------|---------|-----|---------|----------------------------|---------|-----|---------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total Credits Dropped | | | | Total Credits Added | | | |

Total Credits After Change _____

Dean's approval for overload _____ **Adviser's Signature** _____

After securing adviser's signature, **RETURN THIS CARD ALONG WITH YOUR PROJECT PAPERWORK TO THE GRADUATE SCHOOL.**



#795 MBA INDEPENDENT STUDY
THE GRADUATE SCHOOL
 VALPARAISO UNIVERSITY
 Valparaiso, Indiana 46383-6493
 (219) 464-5313 or (800) 821-7685

This form **must** be completed, signed by both the instructor and the program advisor, and returned to the Graduate School Office. Upon approval of the Dean of the Graduate School, copies will be distributed. **Please note:** This completed form does **not** constitute registration for this course. *The student must turn in the registration form with the independent study form.*

IMPORTANT NOTICE: Enrollment in Independent Study (595, 692, 695) requires prior completion of 12 credits of graduate level work. No more than 6 credit hours of Independent Study (595, 692, 695 or any mix thereof) may be used toward completion of a master's degree program.

A copy of the project paper must be filed in the Graduate School Office upon completion.

DEPARTMENT: _____

DATE SUBMITTED: _____ STUDENT ID NUMBER: _____

1. NAME: _____
 LAST FIRST MIDDLE FORMER NAME

2. PRESENT ADDRESS: _____
 NUMBER AND STREET CITY, STATE, ZIP

3. HOME PHONE: _____ WORK PHONE NUMBER: _____

EMAIL ADDRESS: _____

4. PROJECT IS TO BE UNDERTAKEN IN THE _____ SEMESTER, 20 ____ NUMBER OF CREDITS _____

I. Title of Project: _____
Title for Transcript: _____ (limit 24 letters & spaces)
IS: _____

II. PROPOSED PROJECT
Please submit a typewritten/double-spaced description on subject area(s), thesis, scope, particular approach, etc

III. READING LIST
On an attached sheet, in a typewritten format, list at least 5 major references (texts, monographs, articles) that will support the project. References may include both primary and secondary source materials.

Instructor's Name (Printed): _____ Date: _____

Instructor's Approval Signature: _____ Date: _____

Program Advisor's Approval Signature: _____ Date: _____

Graduate Dean's Approval Signature: _____ Date: _____

PLEASE NOTE: Incomplete forms will not be processed.

cc: Registrar's Office