University of Rochester
Department of Computer Science

Independent Study in Computer Science

Last name, First name _____________________________ Student ID _____________________________ Date ____________

Class Year _____________________________ NetID/Email _____________________________

Check one:
☐ CSC390: Supervised Teaching ☐ CSC391: Independent Study
☐ CSC393: Senior Project ☐ CSC395: Research

Check if doing additional Writing or Honors: ☐ W ☐ H

How many credits? ☐ 0.5 ☐ 1 ☐ 2 ☐ 3 ☐ 4

Course Title: _____________________________________________________
Must be less than 28 characters long (note: this is what shows up on official college transcripts)

Course Description:
Must be less than 240 characters

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Course Evaluation:
Must be less than 240 characters

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

*This form does NOT officially register you for an independent study*

Instructor Information:

Name _____________________________ Email address _____________________________

How many credits of independent study (including this) will you complete with this instructor?

___________________________________________________________________

Note: University policy limits students to take 8 credits maximum of independent study per instructor.

Instructor’s Signature: ________________________________________________

Once you receive the instructor’s signature, schedule an appointment to register for the independent study here: https://rochestercsc.youcanbook.me