

IV. What are the criteria your advisers have agreed upon for the satisfactory completion of 45100?

V. What will be the criteria for the evaluation of your completed Independent Study project (45200)?

VI. Student Signature: _____ Printed Name: _____

Adviser Signature: _____ Printed Name: _____

Adviser Signature: _____ Printed Name: _____

**PLEASE RETURN THE COMPLETED AGREEMENT TO
THE OFFICE OF THE DEAN FOR CURRICULUM AND ACADEMIC ENGAGEMENT.**

RECEIVED:

Office of the Dean for Curriculum and Academic Engagement

Date: _____